

EXHIBIT A

<p style="text-align: right;">Page 48</p> <p>1 Q. Do -- so as sit here today, do you think</p> <p>2 you read the itemized paragraphs or not at any time</p> <p>3 during the time that you treated with Dr. Lindner?</p> <p>4 A. I -- I just can't say. As I said before,</p> <p>5 my normal practice would be to read something before I</p> <p>6 sign it, but I was very ill, and I'm not sure really</p> <p>7 if I did or not. I can't be sure.</p> <p>8 Q. Okay. As you sit here today, you don't</p> <p>9 know one way or the other?</p> <p>10 A. Right.</p> <p>11 Q. Okay. Continuing on with the form, the</p> <p>12 next paragraph, so it'll be the one, two, three, four</p> <p>13 -- the fifth one down with your initials. It says, I</p> <p>14 understand that Dr. Lindner will prescribe some</p> <p>15 medications that are not FDA approved for this</p> <p>16 infection, and/or at doses and durations that are not</p> <p>17 FDA approved for any indication.</p> <p>18 So did you -- did you have an</p> <p>19 understanding during the course of the time that you</p> <p>20 were treating with Dr. Lindner for the babesiosis</p> <p>21 now -- and we've moved beyond the hormone stuff, okay.</p> <p>22 So did you have an understanding that he was</p> <p>23 prescribing medication for you that may not be FDA</p> <p>24 approved for the use that he was prescribing it?</p> <p>25 A. What was the question?</p>	<p style="text-align: right;">Page 50</p> <p>1 MR. LAMB: Objection to form. You</p> <p>2 can answer.</p> <p>3 A. No.</p> <p>4 Q. Okay. And how about, did you have an</p> <p>5 understanding that the -- the duration and the doses</p> <p>6 with some of the prescription medication he was</p> <p>7 prescribing for you was not approved or were too high</p> <p>8 than what the FDA was approving?</p> <p>9 MR. LAMB: Objection to form. You</p> <p>10 can answer.</p> <p>11 A. At this time that I signed this, is that</p> <p>12 what you're asking?</p> <p>13 Q. No, at any -- any time. At any time during</p> <p>14 -- in fact, I'm not limiting it to the time of the</p> <p>15 form. I'm -- the -- all of these questions are going</p> <p>16 to be during the course of the time that you treated</p> <p>17 for babesiosis with Dr. Lindner.</p> <p>18 A. Okay. Well, I guess I remember when he</p> <p>19 told me that he needed me to get the medication at a</p> <p>20 different pharmacy because otherwise they would turn</p> <p>21 him into the medical board, at that time I realized</p> <p>22 that it must not be approved.</p> <p>23 Q. And at that time, did you have any</p> <p>24 discussions with Dr. Lindner about that?</p> <p>25 A. No.</p>
<p style="text-align: right;">Page 49</p> <p>1 Q. Did you have an understanding at any point</p> <p>2 in time when you were treating with Dr. Lindner that</p> <p>3 he was prescribing medication that was not approved by</p> <p>4 the FDA for the infection that he had diagnosed you</p> <p>5 with?</p> <p>6 A. I don't think I did.</p> <p>7 Q. Did you have an understanding that he was</p> <p>8 prescribing medications in doses and durations that</p> <p>9 were not approved by the FDA for your -- your -- the</p> <p>10 infection?</p> <p>11 MR. LAMB: Object to form. You can</p> <p>12 answer.</p> <p>13 A. Did I have an understanding? Maybe I'm too</p> <p>14 literal. I just can't figure out, like, did I have an</p> <p>15 understanding? We didn't discuss it.</p> <p>16 Q. Did you have -- so --</p> <p>17 A. But yet I signed this -- but presumably I</p> <p>18 signed this form, so I'm not real sure how to answer.</p> <p>19 I'm so sorry.</p> <p>20 Q. Oh, no, that's okay. And that's why I'm</p> <p>21 trying to figure it out, too, because --</p> <p>22 So as best as you can sit here today,</p> <p>23 what is your recollection? Did you -- did you know</p> <p>24 that there were times where some of the medication he</p> <p>25 was prescribing for you was not FDA approved?</p>	<p style="text-align: right;">Page 51</p> <p>1 Q. Did you have a general understanding of</p> <p>2 what the treatment plan was going to be for you for</p> <p>3 babesiosis?</p> <p>4 A. At the time that he started it? At what</p> <p>5 point?</p> <p>6 Q. At any -- at any time he treated you.</p> <p>7 A. Well, then I don't understand the question.</p> <p>8 I'm sorry, could you restate it?</p> <p>9 Q. Sure. So at any time during the time that</p> <p>10 you were treating with Dr. Lindner for the babesiosis,</p> <p>11 did you have a general understanding of what the</p> <p>12 treatment plan would consist of?</p> <p>13 A. At the beginning, no. Later on, yes. You</p> <p>14 know, I started understanding what all the different</p> <p>15 pharmaceuticals that he was using.</p> <p>16 Q. So just tell me generally, so at this point</p> <p>17 in time where you said, yes, what was your</p> <p>18 understanding of the treatment plan?</p> <p>19 A. That he was using a lot of different</p> <p>20 antimicrobials and antibiotics and pharmaceuticals.</p> <p>21 Q. Okay. And did you have an understanding of</p> <p>22 why he was prescribing the antimicrobials; what it was</p> <p>23 supposed to do -- what they were supposed to do?</p> <p>24 A. He said we had to do that to kill the</p> <p>25 Babesia.</p>

<p style="text-align: right;">Page 52</p> <p>1 Q. How about when he started prescribing</p> <p>2 antibiotics, did you have an understanding of why he</p> <p>3 was prescribing the antibiotics for you?</p> <p>4 A. He said it was to kill the Babesia.</p> <p>5 Q. And I want to call your attention just to</p> <p>6 see, again, if you recall any discussions with Dr.</p> <p>7 Lindner during the entire time that you treated for</p> <p>8 babesiosis with him about the topics in this next</p> <p>9 paragraph. Okay?</p> <p>10 A. Okay. Can you -- can you restate what you</p> <p>11 just said?</p> <p>12 Q. Yeah. So I don't want you limiting your</p> <p>13 memory to the time where you filled that -- or</p> <p>14 initialed and signed the form. Okay. I'm not</p> <p>15 limiting it to that time frame. It's during the</p> <p>16 entire time that you treated with Dr. Lindner. Okay?</p> <p>17 A. Okay.</p> <p>18 Q. So then this next paragraph, which is about</p> <p>19 the seventh one down with your initials, and it starts</p> <p>20 with, I understand that there are risks and possible</p> <p>21 complications involved in attempting to eliminate this</p> <p>22 parasite: increased inflammation and suffering,</p> <p>23 fever, hemo -- hemodialysis [sic], headaches, nausea,</p> <p>24 anxiety, depression, suicide [sic], realization [sic],</p> <p>25 impaired cognition, rash, enlargement of the spleen,</p>	<p style="text-align: right;">Page 54</p> <p>1 Q. And then the second one from the bottom it</p> <p>2 says, I understand that Dr. Lindner may recommend</p> <p>3 corticosteroids/DHEA therapy to control</p> <p>4 immune-mediated inflammation and allow me to tolerate</p> <p>5 the therapy.</p> <p>6 Do you -- do you ever remember having</p> <p>7 any discussions with Dr. Lindner other than what you</p> <p>8 told me about steroid use?</p> <p>9 A. Just that I would need those things to help</p> <p>10 control the inflammation.</p> <p>11 Q. Am I correct then, at least as I understand</p> <p>12 what you're saying to me today, that the anti -- the</p> <p>13 antibiotics and antimalarials were being prescribed to</p> <p>14 you, as you understood them, so that you could kill</p> <p>15 the babesiosis?</p> <p>16 A. Correct.</p> <p>17 Q. Is it also my understanding that, at least</p> <p>18 as you understood it, that the killing of the</p> <p>19 babesiosis may then lead to inflammation?</p> <p>20 MR. LAMB: Objection to form. You</p> <p>21 can answer.</p> <p>22 A. I mean, I'm not a doctor, but that's I</p> <p>23 think what I understood.</p> <p>24 Q. Yeah. And I'm -- I'm only ask -- the only</p> <p>25 thing I'm allowed to ask you, Mrs. Wolking, is your</p>
<p style="text-align: right;">Page 53</p> <p>1 and cardiac rhythm disturbances.</p> <p>2 Do you ever remember having any</p> <p>3 conversations with Dr. Lindner about any of those</p> <p>4 complications that I just read from the form?</p> <p>5 A. No.</p> <p>6 Q. Do you remember ever having the knowledge</p> <p>7 at the time that you were treating with him that you</p> <p>8 could experience any of those complications that I</p> <p>9 just read from the form?</p> <p>10 A. Not that I recall.</p> <p>11 Q. Do you ever remember having any</p> <p>12 conversations with Dr. Lindner about that part of the</p> <p>13 treatment plan could cause inflammation?</p> <p>14 MR. LAMB: Objection to form. You</p> <p>15 can answer.</p> <p>16 A. We did discuss inflammation, yes.</p> <p>17 Q. Can you tell me what you remember about the</p> <p>18 discussion about inflammation?</p> <p>19 A. That it would -- because I would have so</p> <p>20 much inflammation, I would need steroids to control</p> <p>21 it.</p> <p>22 Q. Did you have an understanding of what would</p> <p>23 cause the inflammation?</p> <p>24 A. My understanding was killing Babesia would</p> <p>25 cause inflammation.</p>	<p style="text-align: right;">Page 55</p> <p>1 understanding, so that's all I'm asking.</p> <p>2 So was it your understanding that the</p> <p>3 killing of the babesiosis could lead to inflammation?</p> <p>4 A. That was my understanding.</p> <p>5 Q. Okay. And was it also your understanding</p> <p>6 that the steroids were being prescribed to you by Dr.</p> <p>7 Lindner to help address the inflammation?</p> <p>8 A. Yes.</p> <p>9 Q. Okay. You can put that down now. So how</p> <p>10 are you doing? It's 11 o'clock. We've been going</p> <p>11 about an hour. Do you need to take a break before we</p> <p>12 get into another topic?</p> <p>13 A. Yes, please.</p> <p>14 Q. Certainly. How long do you think you need,</p> <p>15 Mrs. Wolking?</p> <p>16 A. Just a couple minutes would be good.</p> <p>17 Q. Want to come back at quarter after, that</p> <p>18 will be about ten minutes?</p> <p>19 A. That would be great. Thank you.</p> <p>20 Q. Okay. Thank you.</p> <p>21 THE VIDEOGRAPHER: The time is 11:05</p> <p>22 a.m. We are off the video record.</p> <p>23 (Brief recess was taken.)</p> <p>24 THE VIDEOGRAPHER: On the video</p> <p>25 record, 11:14 a.m.</p>

<p style="text-align: right;">Page 56</p> <p>1 BY MS. SHWED:</p> <p>2 Q. Hi, Mrs. Wolking. We took a brief break</p> <p>3 for a comfort break. Are you still ready to continue</p> <p>4 to answer some more questions?</p> <p>5 A. Yes.</p> <p>6 Q. Okay. So we were -- we're -- we've gone</p> <p>7 over the consent forms, and now I want to start</p> <p>8 talking to you a little bit about your treatment with</p> <p>9 Dr. Lindner for babesiosis. Okay?</p> <p>10 A. Okay.</p> <p>11 Q. So initially when you first started</p> <p>12 treating with him, can you describe for me how often</p> <p>13 you were supposed to be in contact with him, and was</p> <p>14 there an explanation to you of were medications going</p> <p>15 to be prescribed and how were they supposed to be</p> <p>16 taken, that type of thing?</p> <p>17 MR. LAMB: Objection to form. You</p> <p>18 can answer.</p> <p>19 A. You know, primarily all our communication</p> <p>20 -- I shouldn't say all. Most -- almost all of our</p> <p>21 communications was through e-mail. So after that</p> <p>22 appointment in, I believe, summer or June of '21, I</p> <p>23 think everything was e-mail, and I don't know how</p> <p>24 often that would be. You know, you have the records.</p> <p>25 I'm sure you can see how often they were. So I really</p>	<p style="text-align: right;">Page 58</p> <p>1 understanding that certain medications were going to</p> <p>2 be prescribed for you. Do you have any recollection</p> <p>3 of that?</p> <p>4 A. I really don't know when that -- that would</p> <p>5 have been. You know, in the summer that -- that</p> <p>6 appointment when he said, I know what's wrong with</p> <p>7 you, you know, his initial -- my recollection is that</p> <p>8 he was going to start with one particular drug as a</p> <p>9 test to see how I reacted to it, and that was the</p> <p>10 Krintafel. And that was where we started. And I</p> <p>11 think I took that for the first time, like, in August.</p> <p>12 And then after that, I don't really remember when we</p> <p>13 added in everything else.</p> <p>14 Q. And then the e-mails are in the chart. I</p> <p>15 don't intend on going over every e-mail because</p> <p>16 they're -- they kind of speak for themselves as to</p> <p>17 what's in the e-mails and things of that nature.</p> <p>18 Were there ever times during the</p> <p>19 entire course when you treated with Dr. Lindner for</p> <p>20 the babesiosis that he was unresponsive to questions</p> <p>21 that you asked -- would have asked him or concerns</p> <p>22 that you may have raised?</p> <p>23 A. Unresponsive in that he didn't respond or</p> <p>24 unresponsive in that he didn't answer specific</p> <p>25 questions?</p>
<p style="text-align: right;">Page 57</p> <p>1 don't recall how often we communicated.</p> <p>2 Q. Did you ever do the -- what I'll refer to</p> <p>3 as what we know today as the telemed visits with Dr.</p> <p>4 Lindner; like this, like, you were on a Zoom or</p> <p>5 something similar where you would see each other to</p> <p>6 talk?</p> <p>7 A. Oh, no. Any phone visits were just phone.</p> <p>8 Q. Okay. So am I correct in believing then</p> <p>9 the contact that you would have had with him would</p> <p>10 have been over a typical standard phone or e-mail?</p> <p>11 A. Correct. And primarily e-mail.</p> <p>12 Q. And were there set times that you needed to</p> <p>13 touch base with him, every six weeks, every four</p> <p>14 weeks, anything like that?</p> <p>15 A. There was not.</p> <p>16 Q. Was there ever initially a discussion of</p> <p>17 what medications to take, how often to take them?</p> <p>18 A. I mean, he was -- he just -- I'm sure it's</p> <p>19 in the medical record, but, you know, he just was kind</p> <p>20 of piecemealy. I never got like a plan upfront. It</p> <p>21 was more like, okay, do this; okay, now, we're going</p> <p>22 to do this is all I can remember.</p> <p>23 Q. Talk to me at least about your first memory</p> <p>24 of the first time you had any kind of either a phone</p> <p>25 or e-mail contact with Dr. Lindner where you get an</p>	<p style="text-align: right;">Page 59</p> <p>1 Q. Well, let's first start with that he didn't</p> <p>2 respond.</p> <p>3 A. Oh, no, he eventually either -- I'm trying</p> <p>4 to think. Sometimes his office person Carol would</p> <p>5 maybe respond, but I would always get a response of</p> <p>6 some kind.</p> <p>7 Q. And then what was the second thing you</p> <p>8 said?</p> <p>9 A. Well, sometimes I'd feel like I would ask</p> <p>10 questions in the e-mails that he didn't really address</p> <p>11 or respond to.</p> <p>12 Q. Can you give me an example of a question</p> <p>13 that you might think he didn't respond to?</p> <p>14 A. No. I guess I remember more of the</p> <p>15 frustration I felt at not getting the specific answer</p> <p>16 or something when I was asking about specifics about</p> <p>17 things, but I don't remember anything specific.</p> <p>18 Sorry.</p> <p>19 Q. That's okay. Okay. Okay. I'm just going</p> <p>20 to bounce around on a couple of topics. I was looking</p> <p>21 in the medical -- Dr. Lindner's chart, and do you</p> <p>22 recall there being some suggestions that you do some</p> <p>23 lab testing to see if babesiosis could be found in</p> <p>24 your bloodstream?</p> <p>25 A. I do recall discussing different test</p>

<p style="text-align: right;">Page 60</p> <p>1 options.</p> <p>2 Q. And am I correct that did you -- did you do</p> <p>3 more than one blood testing, or was it just one for</p> <p>4 the babesiosis?</p> <p>5 A. Yeah, we just -- I -- the best I can</p> <p>6 recall, it was just the one.</p> <p>7 Q. Okay. Did you have an understanding of</p> <p>8 what the results were from that one?</p> <p>9 A. Yes.</p> <p>10 Q. What was your understanding?</p> <p>11 A. That it was inclusive.</p> <p>12 Q. Do you remember having any communication</p> <p>13 with Dr. Lindner about his thoughts about that lab</p> <p>14 result, whether it's phone or e-mail?</p> <p>15 A. I think we discussed that he wasn't</p> <p>16 surprised because the tests are very flawed. And he</p> <p>17 suggested we could -- said we could do other tests,</p> <p>18 there were other options to try, but they were</p> <p>19 extremely expensive, and he didn't necessarily think</p> <p>20 they were necessary.</p> <p>21 Q. Did you have any conversations with any</p> <p>22 other physicians about that inconclusive lab result?</p> <p>23 A. No.</p> <p>24 Q. I saw in some of the e-mails there was</p> <p>25 discussions about getting an IGeneX testing. I think</p>	<p style="text-align: right;">Page 62</p> <p>1 A. No.</p> <p>2 Q. Were you seeing any other physician other</p> <p>3 than Dr. Lindner in that same time frame?</p> <p>4 A. Other than what we already talked about in</p> <p>5 fall of '21, I don't believe so.</p> <p>6 Q. Do you remember having any discussions with</p> <p>7 Dr. Lindner about something called herxing,</p> <p>8 H-E-R-X-I-N-G?</p> <p>9 A. Yes, he talked about it a lot.</p> <p>10 Q. Can you tell me generally what your</p> <p>11 understanding of what herxing was?</p> <p>12 A. Your body's response to the treatment. So</p> <p>13 the inflammation, I guess, that you would have</p> <p>14 symptoms in reaction to killing off the Babesia.</p> <p>15 Q. And do you recall if with your</p> <p>16 conversations with Dr. Lindner in the e-mails, however</p> <p>17 you communicated with him, were there specific</p> <p>18 symptoms that you were suffering from during the</p> <p>19 course of the treatment that he said were herxing?</p> <p>20 A. Yes.</p> <p>21 Q. What were those?</p> <p>22 A. I had a lot of symptoms going on, and I</p> <p>23 don't know what he attributed to herxing. I would</p> <p>24 have to -- that would be in the medical record I</p> <p>25 guess.</p>
<p style="text-align: right;">Page 61</p> <p>1 it's I-G-E-N-E-X. Do you recall discussions about</p> <p>2 IGeneX testing?</p> <p>3 A. I do recognize that name. Would you mind</p> <p>4 adjusting your camera? Your mouth is not on camera,</p> <p>5 and I'm -- I'm a big lip reader I guess.</p> <p>6 Q. Yeah. Sure. I drop -- I lifted my chair</p> <p>7 in the interim, so I think that's probably why.</p> <p>8 A. Okay.</p> <p>9 Q. Is that better?</p> <p>10 A. Thank you.</p> <p>11 Q. Sure. Okay. So other than maybe</p> <p>12 remembering the name of that lab, IGeneX testing, do</p> <p>13 you have any recollections of any discussions more</p> <p>14 specific about that testing?</p> <p>15 A. No.</p> <p>16 Q. Did you have any discussions with any other</p> <p>17 physicians about you being diagnosed with babesiosis</p> <p>18 and the treatment plan that you were going through?</p> <p>19 A. No. I wasn't really seeing any other</p> <p>20 physicians after those couple things we talked about.</p> <p>21 Q. Okay. In the time frame, say, when you</p> <p>22 started the treatment for babesiosis until the</p> <p>23 hospitalization in October of, I think it was 2022,</p> <p>24 for the bowel perforation, would you see your primary</p> <p>25 care doctor at all in that time frame?</p>	<p style="text-align: right;">Page 63</p> <p>1 Q. As you sit here today, can you tell me any</p> <p>2 -- again, just from your recollection and your</p> <p>3 understanding what some of your what I'll call herxing</p> <p>4 symptoms were?</p> <p>5 MR. LAMB: Objection to form.</p> <p>6 A. Yeah, again, I mean, I had a lot of</p> <p>7 symptoms, and I don't -- I never got a clear</p> <p>8 understanding of which symptoms were herxing, which</p> <p>9 were reactions to drugs, which ones were killing the</p> <p>10 Babesia. I mean, I -- it was all -- it's all very</p> <p>11 blurry to me.</p> <p>12 Q. Okay. Tell me some of the symptoms you</p> <p>13 suffered from as you -- as you took the treatment.</p> <p>14 A. Severe nausea, fatigue, brain fog, heart</p> <p>15 palpitations. I don't know how to describe it, like,</p> <p>16 my head was in a vise, like, a vise-like headache.</p> <p>17 Severe weakness. Incontinence. I know there was so</p> <p>18 many symptoms. Dizziness.</p> <p>19 Q. You let me know when you're done. I don't</p> <p>20 want --</p> <p>21 A. It was --</p> <p>22 MS. SHWED: I don't know, are you --</p> <p>23 is she frozen on your end?</p> <p>24 Q. Oh, there you are. Can you hear me, Mrs.</p> <p>25 Wolking? Because you're frozen on my end.</p>

<p style="text-align: right;">Page 64</p> <p>1 A. Yes, you're fine.</p> <p>2 Q. Okay. I don't know, your picture is</p> <p>3 frozen. We'll do the best that we can and we'll see</p> <p>4 how it goes.</p> <p>5 MR. LAMB: I'll try turning her --</p> <p>6 off.</p> <p>7 THE WITNESS: Did that help any?</p> <p>8 MR. LAMB: Yeah.</p> <p>9 MS. SHWED: No, Conor is frozen. I</p> <p>10 mean, I still can hear you -- oh, I think you're</p> <p>11 moving now. No, you're frozen. Well, let's see how</p> <p>12 it goes. Sometimes that can be like an internet</p> <p>13 thing.</p> <p>14 BY MS. SHWED:</p> <p>15 Q. You may still hear and see me, Mrs.</p> <p>16 Wolking?</p> <p>17 A. Yes.</p> <p>18 Q. Okay. You talked a little bit about the</p> <p>19 pharmacies earlier. Tell me how it was determined</p> <p>20 when you're treating with Dr. Lindner for the</p> <p>21 babesiosis what pharmacies were going to be used to</p> <p>22 fill the prescriptions that he had prescribed for you?</p> <p>23 A. Best I recall, I just used our local</p> <p>24 pharmacy at first --</p> <p>25 THE REPORTER: I'm sorry.</p>	<p style="text-align: right;">Page 66</p> <p>1 A. The pharmacy.</p> <p>2 Q. The pharmacy in Tunkhannock?</p> <p>3 A. No, the pharm -- my local pharmacy.</p> <p>4 Q. Okay. Was there any discussion or</p> <p>5 questions that you raised with Dr. Lindner about what</p> <p>6 he just said to you that they would -- the -- I guess</p> <p>7 is it because the dosage was so high they would -- was</p> <p>8 that your understanding?</p> <p>9 A. Yes.</p> <p>10 Q. Was there any discussion about why the med</p> <p>11 -- was there a particular medication that you were</p> <p>12 getting as you recall from the Tunkhannock pharmacy?</p> <p>13 A. The steroid, so prednisone and</p> <p>14 dexamethasone.</p> <p>15 Q. Did you have any discussions with Dr.</p> <p>16 Lindner where you asked him about why the dosage</p> <p>17 needed to be so high?</p> <p>18 A. Yes. And he told me it's what I had to</p> <p>19 have to be able to survive the kill off of the</p> <p>20 Babesia. And he kept assuring me that his daughter</p> <p>21 had taken that much, and it was fine. And I just</p> <p>22 trusted what he was saying. You know, I wanted to get</p> <p>23 better, so I was just trusting what he was saying.</p> <p>24 Q. Did you -- did you have any concerns that</p> <p>25 you voiced to Dr. Lindner that you had to use the Tunk</p>
<p style="text-align: right;">Page 65</p> <p>1 MS. SHWED: Yeah.</p> <p>2 THE VIDEOGRAPHER: Off the video</p> <p>3 record, the time is 11:27 a.m.</p> <p>4 (Brief recess was taken.)</p> <p>5 (The referred-to portion of the</p> <p>6 record was read by the reporter.)</p> <p>7 THE VIDEOGRAPHER: On the video</p> <p>8 record, 11:29 a.m.</p> <p>9 BY MS. SHWED:</p> <p>10 Q. Okay. Mrs. Wolking, I think we got to the</p> <p>11 point where you said, to the best of your recall you</p> <p>12 would use your local pharmacy. Was there some</p> <p>13 additional response you wanted to give me to that</p> <p>14 question?</p> <p>15 A. Yeah, we used local pharmacy for some</p> <p>16 medications, and then others he would have -- he</p> <p>17 wanted to use the Tunkhannock pharmacy. And he</p> <p>18 specifically told me it was because they would be</p> <p>19 alarmed -- or he didn't use that word. Sorry. That</p> <p>20 he would be concerned that they would turn it into the</p> <p>21 medical board because of the dosing, so I needed to</p> <p>22 use the Tunkhannock pharmacy.</p> <p>23 Q. Okay. And when you say to me he said that</p> <p>24 they would turn him into the medical board, did you</p> <p>25 have an understanding of who he meant by they?</p>	<p style="text-align: right;">Page 67</p> <p>1 -- Tunkhannock pharmacy because the local pharmacy at</p> <p>2 home may report him to the medical board?</p> <p>3 MR. LAMB: Objection to form.</p> <p>4 A. Well, I did ask him -- I thought I asked</p> <p>5 him about -- because previously when I was on</p> <p>6 hormones, I used to get all my hormones from the</p> <p>7 Tunkhannock pharmacy. And then at some point years</p> <p>8 into the treatment, he said that I couldn't use them</p> <p>9 anymore, I had to go local. And I had to find a</p> <p>10 compounding center local to me because they weren't</p> <p>11 allowed to send prescriptions out of state. I don't</p> <p>12 know if that was a new thing or what.</p> <p>13 But -- so when he wanted me to go</p> <p>14 back, I -- I think I asked -- I'm not sure if I asked</p> <p>15 him or if I asked Carol, but, like, oh, I can start</p> <p>16 using them again, like, they're allowed to send them</p> <p>17 to me again. And all I remember was, yeah, we can do</p> <p>18 it. So I don't -- I don't really -- I never</p> <p>19 understood why it was like that.</p> <p>20 Q. Okay. Am I correct in believing that when</p> <p>21 you got whatever prescriptions filled from the</p> <p>22 Tunkhannock pharmacy, would they then mail it to you</p> <p>23 in Virginia?</p> <p>24 A. Yes.</p> <p>25 Q. Okay. Was any of the medication that was</p>

<p style="text-align: right;">Page 68</p> <p>1 prescribed by Dr. Lindner covered by prescription 2 insurance? 3 A. Everything through my local pharmacy, so 4 all the antimicrobials and malarials and antibiotics 5 and steroids were all covered by insurance. But when 6 I went through Tunkhannock, you know, he told me, 7 don't -- don't send this into your insurance. 8 Q. Now, I just want to make sure I understood 9 you. Were there times when you were getting steroids 10 through the local pharmacy in Virginia that were 11 covered by your insurance? 12 A. Yes. 13 Q. Okay. So it -- go ahead, I'm sorry. I 14 don't know why your -- is -- is everybody's in her 15 picture really blurry or is it just -- okay. That 16 must just be an internet -- well, we'll just do the 17 best that we can. Remember what we said, technology 18 is wonderful until it's not. 19 A. It's not, yeah. 20 Q. Okay. Was the Tunkhannock pharmacy the 21 only pharmacy that you were using in Pennsylvania? 22 A. Yes. 23 Q. And then all the other medications that 24 were prescribed for you, other than the ones you were 25 being filled in Tunkhannock, you were using your local</p>	<p style="text-align: right;">Page 70</p> <p>1 you for babesiosis? 2 A. Well, they would not mail them until they 3 spoke with me to confirm that I wanted them. So when 4 a -- when a new prescription was called in to them, 5 they would either call -- I think they always called 6 me and said, we have a new prescription, do you want 7 it? 8 Q. Do you recall having any conversations with 9 the pharmacist up in Tunkhannock, did you have any 10 questions for them about how to use the steroids or 11 the dosages or anything like that? 12 A. No. The phone call was strictly, do you 13 want this? I'd say, yes, we'd confirm my address, and 14 that would be it. 15 Q. And then you would -- would you receive, 16 like, in a bottle -- the prescription of steroids in a 17 bottle or an envelope, or how would it come to you? 18 A. A bottle in an envelope. 19 Q. Okay. And would there be any kind of 20 instructions as to how to use them or take them? 21 A. Not that I recall. 22 Q. So one of the things that I wanted to talk 23 to you about is -- 24 MS. SHWED: And can we go to -- this 25 is part of Dr. Lindner's chart, and it's going to be</p>
<p style="text-align: right;">Page 69</p> <p>1 pharmacy? 2 A. Correct. 3 Q. And was it just one -- I thought I saw, 4 were you using different pharmacies in Virginia? 5 A. I mean, our primary pharmacy is Harris 6 Teeter. Once in a blue moon we used Giant because -- 7 well, we used to use Giant primarily and then we 8 switched to Harris Teeter, so there could potentially 9 be something at Giant. Or maybe something wasn't 10 available and we had to go somewhere else, I just 11 don't recall anything specific. 12 Q. Okay. But you knew it was those three 13 pharmacies that you mentioned that you were using for 14 the prescriptions from Dr. Lindner, no other ones that 15 you can recall? 16 A. Like I said, if something wasn't available, 17 we might have gone to -- I can't even remember what it 18 is here in Purcellville, a Walgreens or CVS or 19 something. I mean -- I mean, I know we've done that 20 once in a blue moon, you know, if something is not 21 available and you can get it there. So I don't know 22 if that would apply here or not. 23 Q. Okay. Did you ever have any conversations 24 with the pharmacist at the Tunkhannock pharmacy about 25 the prescriptions that Dr. Lindner was providing to</p>	<p style="text-align: right;">Page 71</p> <p>1 Lindner 70. And, Conor, it's a -- I think I have this 2 right, I think the date of it is October 8th, 2022 3 e-mail. 70, right. 4 MR. LAMB: Can you say that date one 5 more time? 6 MS. SHWED: The page, it's an e-mail, 7 I think it's dated on the top October 8th, 2022 at 8 7:17 a.m., it's like the bottom third of the page and 9 it's Lindner 70. Maybe you'll be able to keep -- 10 there it is. See it on the bottom it starts there, 11 Conor? 12 MR. LAMB: Yeah. 13 BY MS. SHWED: 14 Q. Okay. And I'm actually just going to go to 15 the next page. I just wanted to get the right date on 16 the record. This -- at least -- I'll just put this on 17 the record. It appeared to me from reviewing it, that 18 this was an e-mail sent. It was dated October 8, 19 2022. I think you were a patient at -- in the -- how 20 do you say it? Is it -- how do you say the hospital, 21 Loudoun? 22 A. Loudoun. 23 Q. Loudoun. I think you were a patient there 24 at the time. And Dr. Lindner does a fairly lengthy 25 e-mail which he kind of summarizes his understanding</p>

<p>Page 72</p> <p>1 of your care to date. I just want to go over some of 2 it to see if it's consistent with your recollection or 3 not. Okay? 4 A. Okay. 5 Q. So if you go -- we're on the right page 6 now, and it's the third paragraph. It says in this 7 e-mail you became ill after a tick bite in 2008. Is 8 that consistent with your recollection? 9 A. Yes. 10 Q. Okay. And then he says in this e-mail, you 11 improved with some Lyme treatment, but after 2018 your 12 symptoms were worsening with time. 13 So was there a time after the tick 14 bite in 2008 that your Lyme treatment -- you got 15 benefit from it? 16 A. Yes. 17 Q. And how long did the benefit last after the 18 tick bite? 19 A. Let me think. I just don't recall. I'm 20 trying to put a timeline in my head based on when kids 21 got married and stuff. 22 Q. Yeah, or anniversaries, I get it. Okay. 23 Let me ask you this. Was there a time -- when you 24 first had the tick bite, did you have any symptoms 25 that you associated with the tick bite?</p>	<p>Page 74</p> <p>1 A. I mean, again, he -- the focus was really 2 on the Lyme disease, but he did say that co-infections 3 often went along with it, and he thought, based on my 4 symptoms, that I could potentially have Babesia and 5 Bartonella. And -- but he just said we really just 6 have to treat them -- the treatments are very 7 different for them, so he focused on the Lyme disease. 8 Q. Okay. Did you ever have a discussion -- 9 MR. LAMB: Amy, I'm sorry, can I just 10 make sure my objection to the previous question was 11 noted on the record. It kind of snuck in in between. 12 MS. SHWED: Oh, yeah, I didn't hear 13 it, so go ahead and do that. 14 MR. LAMB: The previous -- the 15 previous question I just -- I objected and I couldn't 16 tell if I got it in in time for the court reporter to 17 hear, so as long as she makes sure that was noted on 18 the record you could -- 19 MS. SHWED: No, I didn't hear it, so 20 I'm sure she -- maybe she didn't either. Okay. But 21 whatever, it's noted, right? 22 BY MS. SHWED: 23 Q. Okay. So -- so what -- what was -- do you 24 remember the treatment for Lyme that you were -- that 25 Dr. Stewart prescribed?</p>
<p>Page 73</p> <p>1 A. I'm sorry, what was the question? 2 Q. So when you got the tick bite in 2008, did 3 you -- did you suffer from any kind of symptoms that 4 you thought to yourself, oh, that's as a result of the 5 tick bite? 6 A. Yes. I was seeing Dr. Stewart, and he was 7 treating me for those symptoms and for Lyme disease. 8 Q. So what were those symptoms you were 9 suffering at that time after the tick bite? Any you 10 remember? I'm sure it won't be an inclusive list. 11 A. Yeah, I'm sorry, I just don't know. It's 12 -- it all blends in. They were distinctly different 13 symptoms than Babesia because I remember discussing 14 with Dr. Stewart, you know, the different things. And 15 at that time he thought I had what they called 16 co-infections, which would be, like, Babesia, and -- 17 but he was primarily focused on treating the Lyme 18 disease. 19 Q. And when you say at that time he -- Dr. 20 Stewart thought that you had co-existing infections, 21 are you talking about Lyme and babesiosis? 22 A. Correct. 23 Q. Okay. And are you able to pinpoint a time 24 -- so did you suffer from Lyme and babesiosis together 25 the entire time?</p>	<p>Page 75</p> <p>1 A. We tried a lot of different things, tried 2 to go more natural. But then the symptoms got worse, 3 so then we -- I was on antibiotics multiple times, 4 different antibiotics. I eventually got so ill that I 5 was on a PICC line for a year with IV antibiotics, and 6 that seemed to knock it out. 7 Q. Do you know how long you treated for Lyme 8 with Dr. Stewart? Was it months? Was it weeks? Was 9 it years? 10 A. Years. 11 Q. Okay. And was there a point in time after 12 you started treating with Dr. Stewart but before you 13 treated with Dr. Lindner that your symptoms went away 14 completely? 15 A. Those symptoms, yes. The Lyme disease 16 symptoms, yes, I felt like I had been completely cured 17 of the Lyme. 18 Q. Okay. And was that -- 19 A. But I was -- but I was perplexed why I 20 still had other symptoms. And that's, you know, when 21 he told me that, you know, you probably still have 22 some co-infections. So why did -- oh, I -- I mean, 23 you didn't ask this question, but I stopped seeing Dr. 24 Stewart because he went concierge, and I couldn't 25 afford him anymore. So it's kind of like, that's why</p>

<p style="text-align: right;">Page 76</p> <p>1 I didn't end up pursuing more of trying to, you know, 2 figure out what the next thing to do was. 3 Q. Okay. And so when you say to me he went 4 concierge, what do you mean by that? 5 A. I don't know. It's around here where 6 doctors -- you know, you have to join a membership 7 kind of thing. It's thousands of dollars, and then 8 you have, you know, more access, I guess, to the 9 doctors. 10 Q. Okay. Are you able to explain to me what 11 symptoms went away with the treatment that Dr. Stewart 12 had prescribed? 13 A. I just -- it's so far back, I just don't 14 remember. 15 Q. Okay. 16 A. I mean, I had so many different symptoms 17 that it's hard for me to put them in boxes if that was 18 Lyme, this is Babesia, that was the treatment. You 19 know, I just -- it's all -- yeah, I just can't 20 remember exactly what the Lyme symptoms were. 21 Q. Did you -- 22 A. It's in the record, you know, what I had 23 and what the symptoms were. 24 Q. Okay. Did you -- did you have an 25 understanding during the time that you were treating</p>	<p style="text-align: right;">Page 78</p> <p>1 Q. Okay. So you don't -- you don't know 2 whether it was 2018 or not, but your recollection is 3 there was a time where you were doing better and then 4 the symptoms got worse? 5 A. Correct. 6 Q. Okay. And then he -- Dr. Lindner says in 7 his chart that -- what he says is, we began the 8 antibabesials in -- in early July of 2021. Does that 9 seem consistent with your recollection? 10 A. Around that time, yeah. 11 Q. Okay. And then he says you saw some 12 improvements, less vibrating and tingling in the legs 13 and less fatigue. Is that consistent with your 14 recollection that after you started the antibabesial 15 in July of 2021, that there was improvement in 16 symptoms of less vibrating and -- and tingling in your 17 legs and less fatigue? 18 MR. LAMB: Object to the form. 19 A. I just don't recall. I -- if it -- you 20 know, I just have to rely on the medical records, I 21 guess. 22 Q. Do you remember there ever being a reduc -- 23 did you suffer from tingling or vibration in your legs 24 when you were treating with Dr. Lindner? 25 A. Yes. Yeah, that was a major symptom that I</p>
<p style="text-align: right;">Page 77</p> <p>1 with Dr. Stewart that there were differences between 2 Lyme and babesiosis? 3 MR. LAMB: Objection to form. You 4 can answer. 5 A. I have an understanding that there was a 6 difference between them, yes. 7 Q. Did you ever talk to Dr. Stewart about what 8 treatment would be done for babesiosis? 9 A. Ask again, please? 10 Q. Did you ever have any discussions with Dr. 11 Stewart about what the treatment would be for 12 babesiosis? 13 A. I don't believe so. 14 Q. And then if we go back to this -- the 15 paragraph, this says that after 2018 your symptoms 16 were worsening with time. Do you have a recollection 17 of any kind of worsening of symptoms in 2018? 18 A. Yeah, I just know after, like I said, being 19 treated for, the Lyme definitely was much improved, 20 but then I started -- you know, I was much improved 21 for a while, I can't tell you how long. And then, you 22 know, I started feeling worse and worse again. So if 23 he -- you know, I don't know that it was 2018, but 24 you're saying that his medical record says that, 25 so ...</p>	<p style="text-align: right;">Page 79</p> <p>1 had and I still have. 2 Q. Did you have the vibration and tingling in 3 the legs when you were treating with Dr. Stewart? 4 A. No, not to my recollection. 5 Q. Do you think that during the time that you 6 were treating with Dr. Lindner there was a lessening 7 of the vibration and tingling in the legs? 8 A. Yes, it is less now than when I started. 9 Q. Do you think during the time that you 10 treated with Dr. Lindner that there was less fatigue? 11 MR. LAMB: Objection to form. 12 A. Are you saying today versus when I -- with 13 him? 14 Q. When you were treating with him. 15 A. I don't understand the question. 16 Q. During the times that you were treating 17 with Dr. Lindner, so you're taking the medications as 18 he prescribed them, did you see a reduction in the 19 fatigue -- in your fatigue at any point in time during 20 the time you were treating with him? 21 A. During the time I was treating? No. 22 During -- 23 Q. During the time -- this would be again -- 24 I'm sorry? 25 A. I just want to make sure I'm understanding,</p>

<p style="text-align: right;">Page 80</p> <p>1 during the treatment time. So you're talking about 2 from June -- middle -- summer of '21 through October 3 of '23, you're talking about that time frame, not now? 4 Because now I could definitely say I 5 have less fatigue, but you're talking about during the 6 treatment time. 7 Q. Yes. Not -- not -- I mean, we'll get into 8 now later, but I really want to focus on what, if 9 anything, the treatment that Dr. Lindner prescribed 10 did for you. That's all. 11 A. Gotcha. 12 Q. Okay. So he -- what he has written here in 13 his summary is that in early July of 2021, after you 14 started the antibabesial treatment, that there was 15 some improvement in your hot flashes and night sweats, 16 that they were less. Do you believe that was true in 17 the summer of 2021? 18 A. I just have no memory. 19 Q. Okay. How about less nausea in the summer 20 of 2021? 21 A. I just don't remember. 22 Q. Less abdominal discomfort or headaches in 23 the -- in the summer of 2021? 24 A. No. I mean, that's when I started the 25 treatment, you're saying.</p>	<p style="text-align: right;">Page 82</p> <p>1 A. Atovaquone. 2 Q. Well, we can -- 3 A. It's so small. 4 MS. SHWED: Well, we can blow it up. 5 Can you blow up the first half of it for me -- 6 THE WITNESS: Yeah, atovaquone. 7 MS. SHWED: -- so she can see it? 8 BY MS. SHWED: 9 Q. Okay. 10 A. Yeah, that -- 11 Q. Is that much better? 12 A. Yeah, much better. Thank you. 13 Q. Okay. Do you recall there being a time he 14 has it that you stopped taking the atovaquone for 15 about a week and you felt worse? Do you remember 16 anything about that? 17 MR. LAMB: Objection to form. Did 18 you mean atovaquone? 19 Q. Yeah. Do -- I'll do -- I'll read the 20 paragraph. It says, she stopped atovaquone -- I might 21 be saying that wrong -- for a week and felt more ill. 22 You herxed hard with taking T-A-F-E-N-O-Q-U-I-N-E, so 23 from September '21 through January of '22, you took 24 only atovaquone and azithromycin. Is that accurate? 25 A. I just have to rely on this. I don't have</p>
<p style="text-align: right;">Page 81</p> <p>1 Q. Uh-huh. 2 A. Yeah. No. So I don't understand the 3 question of less something. How can I have less of a 4 symptom when I hadn't started the treatment yet? 5 Q. Well, according to this note that I have in 6 front of you, you started the treatment -- what he has 7 documented here -- in early of July of 2021. Is that 8 not consistent with your recollection? 9 A. That sounds about right. 10 Q. Okay. 11 A. But then you were asking me about symptoms 12 in July of 2021; is that right? 13 Q. Yes, the summer of 2021. So after you 14 start taking the antibabesial treatment, at that time 15 did you see any improvement in any of those symptoms 16 that I was reading off? 17 A. Oh, no. 18 Q. Okay. And he says -- at least according to 19 this, and we can see it -- I might butcher some of the 20 medication. The last sentence in that paragraph says 21 that you stopped the A-T-O-V-A-Q-U-O-N-E. Do you know 22 how you say that? 23 A. I'm trying to find it here. 24 Q. It's the last sentence in the third 25 paragraph from the top.</p>	<p style="text-align: right;">Page 83</p> <p>1 a mem -- you know, I don't remember exactly. 2 Q. Okay. Is there anything in your mind that 3 sticks out, a reason why you would disagree about what 4 he has written down? 5 A. No. 6 Q. So from when you started in the summer of 7 2021 with the antibabesials until the end of that 8 year, did you see any improvement in your symptoms at 9 all? 10 A. No. 11 Q. Do you ever recall having any discussions 12 with Dr. Lindner about why there wasn't any 13 improvement with your symptoms? 14 A. Yeah, he just -- 15 Q. During that time frame now. 16 A. I'm -- 17 Q. So we're -- I just wanted to make sure, and 18 I'm sorry to interrupt you, in this time frame. So 19 from the summer of 2021 until the end of that year. 20 A. He just said we had to do much more and 21 take more -- other drugs, and it would just take time. 22 Q. In the summer of 2021 to the end of that 23 calendar year 2021, were you taking any steroids? 24 A. I don't recall. 25 Q. Do you remember, again, from the summer of</p>

<p>Page 84</p> <p>1 2021, until the end of the calendar year 2021, that</p> <p>2 you had stopped any of the antibabesial treatment in</p> <p>3 that time frame?</p> <p>4 A. My memory is that we -- initially it was</p> <p>5 more a start and stop to kind of see how I reacted to</p> <p>6 them, and see -- he was using that as a gauge as to,</p> <p>7 like, I wouldn't react to that drug if I didn't have</p> <p>8 Babesia. So he was saying, well, since you reacted to</p> <p>9 it, we know you have Babesia. So I don't recall it</p> <p>10 being -- I was probably on the atovaquone constant.</p> <p>11 The Krintafel or the other name for it was -- you had</p> <p>12 it here, tafenoquine is also Krintafel is what I think</p> <p>13 of it as, it was sporadic.</p> <p>14 Q. Okay. And were both of those medications</p> <p>15 being taken, as you understood them, to kill the</p> <p>16 Babesia?</p> <p>17 A. Yes.</p> <p>18 Q. Okay. And then if you look to the next</p> <p>19 paragraph, which would be the fourth one down, it</p> <p>20 starts, in January of 2022. Do you see --</p> <p>21 A. Yes.</p> <p>22 Q. -- that? Is that print okay for you to see</p> <p>23 now?</p> <p>24 A. Yes.</p> <p>25 Q. In January of 2022 you got a virus, and you</p>	<p>Page 86</p> <p>1 that's really what I remember about starting it then.</p> <p>2 And so in January he was pushing that, yeah, we needed</p> <p>3 to push it harder, be more aggressive with more drugs.</p> <p>4 Q. So in -- from the summer of 2021 now until</p> <p>5 the end of that calendar year, were -- how would you</p> <p>6 describe -- after you started the regimen for the</p> <p>7 antibabesials, how were you doing at that point? Were</p> <p>8 you the same? Were you better? Were you worse?</p> <p>9 MR. LAMB: Objection to form.</p> <p>10 THE WITNESS: I still answer?</p> <p>11 MR. LAMB: Uh-huh.</p> <p>12 THE WITNESS: When I would take them,</p> <p>13 I think the -- I think it was the Krintafel or the</p> <p>14 atovaquone -- no, sorry, the tafenoquine, it would</p> <p>15 definitely make me feel much worse. And like I said,</p> <p>16 it -- but it was not a daily medication, so I would</p> <p>17 take it, and he told me it would stay in my system for</p> <p>18 a month. So after I took it, I'd have to -- I'd feel</p> <p>19 worse for a while, and then it seems like I'd feel a</p> <p>20 little better, but not necessarily my symptoms, more</p> <p>21 the reaction to the meds. Again, it's -- I'm not a</p> <p>22 doctor. I can't -- it's hard for me to sort out what</p> <p>23 was symptoms from the meds and from the symptoms I</p> <p>24 already had.</p> <p>25 BY MS. SHWED:</p>
<p>Page 85</p> <p>1 became more reactive to babesiosis. Do you remember</p> <p>2 being sick in January of 2022?</p> <p>3 A. Not really.</p> <p>4 Q. Do you remember your babe -- what I'll call</p> <p>5 the symptoms of babesiosis, were they worse in January</p> <p>6 of '22 than they had been the year before?</p> <p>7 A. I just don't remember.</p> <p>8 Q. Do you remember in January of 2022, if you</p> <p>9 go down about seven lines, Dr. Lindner writes that he</p> <p>10 advised you to take a more aggressive antibabesial</p> <p>11 therapy, because the only way to reduce one's reaction</p> <p>12 to the infection is to reduce the number of organisms?</p> <p>13 Do you remember any discussions with</p> <p>14 Dr. Lindner about what he has documented here?</p> <p>15 A. Yes, we did talk about that.</p> <p>16 Q. Can you tell me more of what you remember</p> <p>17 about that?</p> <p>18 A. Well, I remember in 2021 he talked about</p> <p>19 wanting to be more aggressive. And I had -- like, we</p> <p>20 had kids and grandkids coming to visit or something,</p> <p>21 and I was like, I don't really want to be, you know,</p> <p>22 really sick from the med -- from the treatment. And</p> <p>23 he kind of agreed that we would wait until January to</p> <p>24 kind of start the aggressive, because, you know, it</p> <p>25 was probably going to make me feel worse. And so</p>	<p>Page 87</p> <p>1 Q. So when you started taking the meds in the</p> <p>2 summer of '21 until the end of the calendar year 2021,</p> <p>3 were there additional symptoms that you were</p> <p>4 experiencing that you hadn't experienced before you</p> <p>5 started the medication?</p> <p>6 A. Yes.</p> <p>7 Q. What were those?</p> <p>8 A. I have no idea. I just remember feeling,</p> <p>9 you know, sick and much worse. So I don't remember if</p> <p>10 it was new symptom -- I know nausea was a big thing,</p> <p>11 but I don't know if it was new symptoms or just</p> <p>12 exasperate the other ones I already had.</p> <p>13 Q. So when you say to me you began to feel</p> <p>14 sick or worse, is there any way for you to describe to</p> <p>15 me more specifically what you mean by that?</p> <p>16 A. No. I mean, I'm sure it's in his notes,</p> <p>17 you know, ever -- whenever we would communicate. I</p> <p>18 know that severe fatigue and severe nausea were a big</p> <p>19 part. And just -- like I said, just remember feeling</p> <p>20 really sick, but I don't remember specifically what</p> <p>21 symptoms were what.</p> <p>22 Q. So in the summer of 2021, until the end of</p> <p>23 the calendar year 2021, what -- would you -- would you</p> <p>24 be able to get out of bed and function or do anything?</p> <p>25 A. Yeah, I was still functional at that time.</p>

<p style="text-align: right;">Page 88</p> <p>1 Q. And it looks like as of January 2022, he 2 said he became more aggressive with the antibabesial 3 treatment. Is that consistent with your recollection? 4 A. Yes. 5 Q. Okay. And what changed -- what changed in 6 the regimen or the treatment from the year before, now 7 coming into January of 2022? 8 A. The best I can remember -- does it say 9 there when I took azithro? So apparently I was 10 already -- I didn't even remember this, but apparently 11 I was already taking azithro. So at some point he 12 would have added more Krintafel and the Arte-M. I was 13 still taking the atovaquone and the azithro, and it 14 seems like there was another antibiotic in there, too. 15 So I don't know at what point he started the different 16 ones. 17 Q. So what was one medication you said you 18 took pretty consistently during the whole time? Was 19 there one medication? 20 A. Yeah, the atovaquone. 21 Q. Did the dose change from 2021 to 2022 of 22 that medication? 23 A. Not that I recall. 24 Q. Okay. And how often were you taking that? 25 A. I think twice a day.</p>	<p style="text-align: right;">Page 90</p> <p>1 this note, that as of May of 2022, this is what he 2 said -- I'll read it to you, then I'll ask some 3 questions about it, but you can read along. It's in 4 the fourth paragraph, about the middle of the 5 paragraph it starts, by May of 2022, you had gotten 6 more improvements with the A-T-O-V-A-Q-O-U-N-E and the 7 T-A-F-E-N-O-Q-U-I-N-E. 8 Do you recall any improvements after 9 you started those medication in May of 2022? 10 A. I don't recall. 11 Q. And so he goes on to say, your shortness of 12 breath had improved. Do you have any recollection of 13 that in this time frame, May of 2022? 14 A. Sorry, I don't. 15 Q. As you sit here today, during the entire -- 16 so I'm not just limiting it to 2022, but during the 17 whole time that you treated with Dr. Lindner for the 18 babesiosis, do you remember any improvement in your 19 shortness of breath? 20 A. I don't. It's just all a blur. 21 Q. Okay. How about your nausea or your 22 headaches, do you remember any improvement in May of 23 2022 with either of those symptoms? 24 A. No. 25 Q. This also says that there were less bad</p>
<p style="text-align: right;">Page 89</p> <p>1 Q. Okay. And for how long did you take it 2 twice a day? 3 A. No memory. You know, at least a year I 4 would guess. That's a guess. Sorry. 5 Q. Okay. And then you said that was it -- 6 there's something I saw A-R-T-E-M? 7 A. Arte-M, yeah. 8 Q. Did you -- when you started that, how often 9 would you take that? 10 A. It's in the medical record. I just don't 11 know when dosing -- dosing or when it was. I'm sorry. 12 Q. That's okay. Can you give me a range of 13 how often you would take it, so as little as X and as 14 most as -- are you able to do that? 15 A. I think -- I think it was a three times a 16 day. 17 Q. Okay. And then that T-A-F-E-N-O-Q-U-I-N-E, 18 you said you knew it by another name, something with a 19 K? 20 A. Krintafel. 21 Q. Krintafel. How often would you take that? 22 A. Not daily. So he would usually have me 23 take one or two or three at one time, and I just -- at 24 different intervals. I just don't recall the dosing. 25 Q. And then it looks, at least according to</p>	<p style="text-align: right;">Page 91</p> <p>1 dreams. Did you start to experience bad dreams when 2 you were taking any of these medications? 3 A. I just don't remember when they started or 4 when they got better. 5 Q. Okay. But at some point you did start to 6 suffer bad dreams? 7 A. Yes. 8 Q. And it looks like in -- he writes a little 9 bit above that in March you started taking 10 hydrocortisone in 2022. You see the sentence above 11 the May 2022? 12 A. Okay. 13 Q. Is that -- do you have any reason to 14 dispute that you started taking hydrocortisone in 15 March 2022? Like, do you have a specific recollection 16 that would say that's not accurate? 17 A. No, I don't really remember. 18 Q. Did you have an understanding as to why you 19 started the hydrocortisone? 20 A. Vague understanding, yes. 21 Q. Can you tell me -- whatever it is, will you 22 tell me what your understanding was? 23 A. I mean, just that it would help with the 24 reaction to the die-off of Babesia and inflammation. 25 Q. And once you started it, the</p>

<p>Page 92</p> <p>1 hydrocortisone, what -- did you notice any improvement 2 in any of the symptoms? 3 A. Not that I recall, but I just really don't 4 remember that time frame. 5 Q. Then the next paragraph takes us into mid 6 May and June of 2022. And he said you took a very 7 strong antibabesial regimen including that Arte-M. Am 8 I saying that right? 9 A. Arte-M. 10 Q. Okay. Then you had blood in your urine. 11 Do you remember testing your urine in -- 12 A. Yes. 13 Q. -- 2022? 14 Did you have an understanding as to 15 why you were testing your urine? 16 A. No, not particularly. I mean, he tried to 17 explain it to me, but I'm not a doctor, and I just did 18 what he told me to do. 19 Q. Do you have a recollection of how often you 20 would do the urine test? 21 A. I think it changed over time, but not 22 particularly. I mean, I think sometimes it was every 23 day and other times it was twice a day, but I'm just 24 not sure. 25 Q. And how were you doing the testing? So was</p>	<p>Page 94</p> <p>1 record was read by the reporter.) 2 A. I think it was just he would respond in 3 e-mails that he acknowledged that whatever I was 4 reporting to him was in the urine. 5 Q. By -- so if these documentation dates are 6 correct, as of June of 2022, you're under treatment 7 for babesiosis for about a year under Dr. Lindner. 8 Did you notice any difference in your symptoms or your 9 condition in any way, better or worse? 10 A. Not that I recall, specifically. 11 Q. And so in that first year the records will 12 reflect the medications that you were taking. But 13 were you taking -- were you under the treatment the 14 entire year? In other words, there was no part of 15 that calendar year, June of '21 until June of '22, 16 that you stopped the treatment? 17 A. I mean, yeah, like I said, it was 18 intermittent in '21, so -- so the Mepron, that's 19 atovaquone, that's the other name I know it for. 20 Q. Okay. 21 A. That was pretty consistent. But I think 22 there was a time like I went out of town and didn't 23 want to mess with flying with a liquid. So I -- I 24 asked him, like, could I go off of it for a week? Is 25 that going to be a big deal? And he said it was fine</p>
<p>Page 93</p> <p>1 it something you could do at home or is it something 2 that you had to take a urine sample and send it out 3 somewhere? 4 A. No, I did it at home. It was just dipping 5 a stick. 6 Q. Okay. Do you remember having any 7 discussions with Dr. Lindner about your urine testing 8 and what, if anything, that meant? 9 A. I mean, I would report to him if I saw 10 anything, if the -- if the test showed anything. But 11 we didn't really discuss it, although I guess he would 12 respond in e-mail. I do remember at times that he 13 would respond in e-mail and just say, okay. You know, 14 he under -- showed something in the urine -- 15 THE REPORTER: We're missing audio. 16 Q. We lost you -- yeah, I lost the audio 17 again. So let's just -- we'll try -- I heard you at 18 the end there. So my question was -- if you don't 19 mind repeating your answer the best that you can, was 20 there discussions with Dr. Lindner about what the 21 urine testing was showing? 22 A. Can you tell me what you already have? 23 MS. SHWED: Yeah, I -- Christine, did 24 you get any of her answer on the urine? 25 (The referred-to portion of the</p>	<p>Page 95</p> <p>1 to try it. And I did feel worse while I was gone 2 without it. So he seemed, like, that -- you know, the 3 fact that, okay, you need to be on it. 4 So I can't say that I consistently 5 took everything all the time. And like we already 6 talked about, I didn't take some of them until '22. 7 So -- and then the Krintafel, like I already said, is 8 -- was very intermittent, so I can't say I was taking 9 it the whole time of '21. But as far as I know, there 10 was no purposeful breaks from the medications, if 11 that's what you're asking. 12 Q. Yeah. And so there was -- I mean, I 13 understand the way it was being prescribed, some of it 14 was intermittent, and you didn't have to take some of 15 it every day, and some of the other medications other 16 days. 17 But it seems like, other than the 18 time when you were traveling, there was no break in, 19 however, when Dr. Lindner was recommending you take 20 the medication you took it, from June of '21 until 21 June of '22; is that right? 22 A. Would be my memory, yeah. 23 Q. Okay. And it looks like, at least 24 according to the notes in 2022, you started 25 hydrocortisone. And then if you look in this next</p>

<p>1 paragraph, it says -- it starts, so in mid May and mid 2 June, the second sentence said you needed prednisone 3 increased to 70 milligrams per day. 4 So in mid May to mid June, did you -- 5 do you have a recollection of taking prednisone? 6 A. I mean, just that I know I switched over at 7 some point. 8 Q. Okay. Do you know why you switched over 9 from hydrocortisone to prednisone? Did Dr. Lindner 10 explain to you why he was recommending that? 11 A. I remember something about one steroid 12 caused more swelling than the other. And I don't -- 13 but I don't remember -- there were three steroids that 14 I was taking at different times if you count the 15 dexamethasone. And so I'm not sure I'm remembering 16 which one is the one that caused more swelling, and I 17 -- but I think it was -- no, I can't even guess now. 18 So I don't know if that was the reason for switching 19 over or not. 20 Q. Okay. Do you remember ever -- once you 21 would take that -- again, this same time frame, we're 22 still in, like, the summer of 2022? 23 A. Okay. 24 Q. You know, so from -- in 2022 up until the 25 summer of 2022, you're taking initially</p>	<p>Page 96</p> <p>1 Q. In all the time that you took the steroids 2 was there any improvement? Now, I'm not just limiting 3 you to 2022. So the entire time under Dr. Lindner's 4 care that you took the steroids, do you think you 5 received -- did you feel any different or any benefit 6 when you were taking? 7 MR. LAMB: Objection to form. 8 A. Are you saying when I specifically was 9 taking the steroids? 10 Q. Yeah. I mean, I understand that you're 11 taking the antibabesials, too. But when the steroids 12 were added as part of the regimen for the treatment, 13 whether it was the hydrocortisone or the prednisone or 14 the -- what was the third one you were taking? 15 A. Dexamethasone. 16 Q. Did you believe that you felt any better 17 when you started taking any of those steroids with the 18 antibabesial treatment? 19 MR. LAMB: Objection to form. 20 A. I mean, I do recall times kind of early on 21 with taking the steroids, probably the very first time 22 starting to take the steroid -- steroids that I 23 remember thinking, you know, it helped my fatigue. 24 Like, I felt better from taking them. But after the 25 initial starting to take it, then I think it just got</p> <p>Page 98</p>
<p>1 hydrocortisone, and then, at least according to this 2 record, it switched to prednisone. Did you see any 3 benefit when you were taking those steroids as to how 4 you were feeling? 5 MR. LAMB: Objection to form. You 6 can answer. 7 A. Did you ask if I saw any improvement? 8 Q. Yeah. In other words, when you were taking 9 them, did you feel any better when you were taking the 10 steroids? 11 A. No. I kind of remember like I felt 12 terrible when I took them, but I felt terrible in 13 other ways when I didn't take them. And I couldn't -- 14 I couldn't even figure out if it was helping me or 15 not. 16 Q. Okay. Do you remember having any 17 discussions with Dr. -- with Dr. Lindner expressing 18 that you couldn't tell if they were helping you or not 19 back then? 20 A. Yeah, I told him that a lot. 21 Q. And what was his -- what do you recall his 22 response being to that, if any? 23 A. Just that we had to do this because, you 24 know, my body was struggling with the die-off, and it 25 would just -- it would help me.</p> <p>Page 97</p>	<p>1 mixed up in all the other symptoms, and it was hard to 2 parse out what symptoms were caused from what -- from 3 what drug or from what issue. 4 Q. Did Dr. Lindner ever tell you that he 5 thought you were suffering from symptoms from the 6 steroids? 7 A. No. As a matter of fact, when I would ask 8 him, you know, could this be -- you know, the symptom 9 be from the steroids, and he would -- he would always 10 say, no, that it was from the die-off or the herxing. 11 Q. And do you have a recollection of other -- 12 other than him saying, no, it wasn't from the steroid, 13 any other reason he may have given you as to why he 14 thought it wasn't the steroids? 15 A. No, I don't recall him saying that. 16 Q. Okay. Then he says in July of 2022 you had 17 a DVT. Is that consistent with your recollection? 18 A. Yes. 19 Q. Okay. And where did you treat for the DVT? 20 Did you -- 21 A. Inova Loudoun. 22 Q. And then he also says in July you may have 23 had COVID. Did you ever test for COVID during the 24 2022 to see if you had COVID or not? 25 A. Yes.</p> <p>Page 99</p>

<p style="text-align: right;">Page 100</p> <p>1 Q. Did you ever have it or no, COVID?</p> <p>2 A. No, I never tested positive. Now that I'm</p> <p>3 thinking about that, I remember it may -- okay. So he</p> <p>4 said in January of '22, it may have been COVID, and</p> <p>5 that's true, and I was tested and it was negative. So</p> <p>6 I don't know why he would say it may have been COVID.</p> <p>7 I was told it wasn't, but ...</p> <p>8 And I did go -- you -- I do want to</p> <p>9 correct, you asked me if I had seen -- or I think I</p> <p>10 didn't see any either general practitioners, but I</p> <p>11 guess I remember going to an urgent care at this time,</p> <p>12 January of 20 -- or I think -- I believe January of</p> <p>13 '22 I went to an urgent care because of being sick,</p> <p>14 and my husband wanting me to get a COVID test. So</p> <p>15 that -- because that would affect him going to work or</p> <p>16 not. And so -- yeah, I wasn't. So then he said in</p> <p>17 July I had COVID? Where is that?</p> <p>18 Q. If you -- if you go down to the next</p> <p>19 paragraph where it says, so from mid May, and then if</p> <p>20 you go down three lines, the sentence starts at the</p> <p>21 end of that third line, in early July.</p> <p>22 A. Okay. Yeah.</p> <p>23 Q. July you had the DVT, then got another</p> <p>24 virus, which may -- which may gave you a fever and</p> <p>25 left you more ill again.</p>	<p style="text-align: right;">Page 102</p> <p>1 you -- did you discuss with the people who were</p> <p>2 treating you for DVT the medications that you were</p> <p>3 taking that were being prescribed by Dr. Lindner?</p> <p>4 A. I really don't -- I -- I did not discuss</p> <p>5 anything with them because I was out off it in severe</p> <p>6 pain, traumatized by emergency surgery late at night.</p> <p>7 So I don't know. I did -- I did not discuss that with</p> <p>8 anybody.</p> <p>9 I can't imagine that we would not</p> <p>10 have -- or my husband would not have told them what</p> <p>11 medications I was on and the standard questions, so I</p> <p>12 assume they knew. I assume it's in the hospital</p> <p>13 records, but I really don't recall being a part of any</p> <p>14 conversation like that.</p> <p>15 Q. Okay. So -- but as you sit here today, you</p> <p>16 have no recollection of talking to the people who</p> <p>17 treated the DVT about any of the medications Dr.</p> <p>18 Lindner was prescribing at that time?</p> <p>19 A. No.</p> <p>20 Q. Now, in this -- again, the same paragraph,</p> <p>21 he documents that you improved with taking 25</p> <p>22 milligrams a day of prednisone, but quickly needed 40</p> <p>23 milligrams daily.</p> <p>24 Do you remember any improvement with</p> <p>25 the prednisone during this time frame, May and June of</p>
<p style="text-align: right;">Page 101</p> <p>1 A. Right. Yeah, I did test again, and it was</p> <p>2 -- it was negative. So I never had a positive.</p> <p>3 Q. And during the time that you were treated</p> <p>4 for the DVT in July of 2022, did you remain on the</p> <p>5 regimen for the antibabesial?</p> <p>6 A. No. I was in the hospital for almost a</p> <p>7 week, and they did not, of course, keep me on any of</p> <p>8 that. And I didn't take it.</p> <p>9 Q. And so when you were taken off the regimen</p> <p>10 that Dr. Lindner had been prescribing at that time,</p> <p>11 how -- were the -- how were your symptoms as it</p> <p>12 relates to the Babesia?</p> <p>13 A. I have no idea. I was in the hospital in</p> <p>14 excruciating pain. I had had emergency surgery, and</p> <p>15 where they told me I almost lost my leg. And I just</p> <p>16 -- that was the furthest thing from my mind at that</p> <p>17 point. I don't even -- I don't even know when I went</p> <p>18 back on the -- all his stuff. I don't even know.</p> <p>19 Q. Do you know, Mrs. Wolking, during the time</p> <p>20 that you were being treated for the DVT, did any of</p> <p>21 the physicians who were treating you have any concern</p> <p>22 about the regimen that you were on or that Dr. Lindner</p> <p>23 was prescribing?</p> <p>24 MR. LAMB: Objection to form.</p> <p>25 Q. Yeah. You know, let me ask you this. Did</p>	<p style="text-align: right;">Page 103</p> <p>1 2022?</p> <p>2 MR. LAMB: Objection to form. I</p> <p>3 think you might mean a different date range if you're</p> <p>4 talking about the sentence we're looking at, but ...</p> <p>5 Q. Okay. So in -- it looks like -- I</p> <p>6 apologize. It looks like he's talking in early July.</p> <p>7 So in the time frame in early July, which I guess is</p> <p>8 the time when you were being treated for your DVT,</p> <p>9 were you also taking the steroids at that time?</p> <p>10 MS. SHWED: Did we lose them again?</p> <p>11 THE VIDEOGRAPHER: The time is 12:21.</p> <p>12 We are off the video record.</p> <p>13 (Brief recess was taken.)</p> <p>14 (The referred-to portion of the</p> <p>15 record was read by the reporter.)</p> <p>16 THE VIDEOGRAPHER: On the video</p> <p>17 record, 12:25 p.m.</p> <p>18 MS. SHWED: Patrick, can you bring</p> <p>19 back up that exhibit, I guess it would be Lindner 71</p> <p>20 is the Bates number?</p> <p>21 BY MS. SHWED:</p> <p>22 Q. Okay. Can you see that, Mrs. Wolking?</p> <p>23 A. Yes.</p> <p>24 Q. Okay. Do you remember the question that</p> <p>25 the court reporter read before we got back on the</p>

<p>Page 104</p> <p>1 video record?</p> <p>2 A. No.</p> <p>3 Q. Okay. I think the gist of it was, in July</p> <p>4 of -- of 2022, according to Dr. Lindner's summary that</p> <p>5 we've been referencing during your deposition, he says</p> <p>6 that you were taking prednisone, 25 milligrams and</p> <p>7 then later 40 milligrams, but you saw improvement on</p> <p>8 the steroids.</p> <p>9 Do you have any memory of any</p> <p>10 improvement on the prednisone, whether it was the 25</p> <p>11 milligrams or the 40 milligrams?</p> <p>12 A. No, I really don't remember that time</p> <p>13 period.</p> <p>14 Q. Then if you look at the next paragraph,</p> <p>15 it's August 19th, see where it says by August, it's</p> <p>16 actually --</p> <p>17 MS. SHWED: Do you mind scrolling</p> <p>18 down a little bit, Patrick? There it goes.</p> <p>19 Q. It's the second from the last paragraph</p> <p>20 there on bottom, the first -- the last full one there.</p> <p>21 A. Can you make it bigger, please? Thank you.</p> <p>22 Q. Can you see it better now, Mrs. Wolking?</p> <p>23 A. Can you move it -- thank you. Yeah. Move</p> <p>24 it over. Okay -- oh, no. Okay. Great.</p> <p>25 Q. So at least according to Dr. Lindner's</p>	<p>Page 106</p> <p>1 recollection?</p> <p>2 A. No, I really don't know.</p> <p>3 Q. Are you able to be mobile in August of</p> <p>4 2022?</p> <p>5 A. No. By then I was pretty much bedridden</p> <p>6 with -- not with the DVT, but with the treatment. A</p> <p>7 week -- I was home -- I was in the hospital about a</p> <p>8 week, I was home a week, I think maybe that's when I</p> <p>9 was sick. But then the next week, I went back in the</p> <p>10 hospital for, like, another five days or something</p> <p>11 because I had severe hip pain and couldn't -- couldn't</p> <p>12 move my hip at all without excruciating pain. And</p> <p>13 they decided that it was because -- it was my other</p> <p>14 leg. It was -- they decided that it was because I had</p> <p>15 put so much -- all my weight on the right leg with the</p> <p>16 left DVT that I just stressed it out or something, and</p> <p>17 I have -- you know, I have a history of hip</p> <p>18 replacement, so they -- it wasn't happy that I was</p> <p>19 using just my right leg for quite a while. So I was</p> <p>20 back in the hospital again until they got the pain</p> <p>21 under control.</p> <p>22 Q. Okay. So how long do you think you -- the</p> <p>23 DVT affected you? Whether it was from the admission</p> <p>24 of the DVT, then you have the surgery, then you said</p> <p>25 you came home, and you were still in some pain, and</p>
<p>Page 105</p> <p>1 summary, he's indicating by August 19th of 2022, you</p> <p>2 were taking 300 milligrams of prednisone daily to cope</p> <p>3 with strong antibabesial regimen and you had severe</p> <p>4 nausea.</p> <p>5 Do you ever remember a time where</p> <p>6 you're taking 300 milligrams of prednisone daily?</p> <p>7 A. I remember doing that, yes.</p> <p>8 Q. And what was your understanding as to why</p> <p>9 you were taking that dose, if you have one?</p> <p>10 A. To deal with the strong reaction of the</p> <p>11 die-off.</p> <p>12 Q. Okay. And was there any benefit to taking</p> <p>13 that 300 milligram prednisone dose?</p> <p>14 A. I was -- I don't know. I was feeling</p> <p>15 pretty sick, and -- at that time, so I really don't</p> <p>16 know.</p> <p>17 Q. How long were you in the hospital for the</p> <p>18 DVT?</p> <p>19 A. I want to say six days or seven days.</p> <p>20 Q. And did you have any restrictions after you</p> <p>21 were discharged as far as your mobility for the DVT or</p> <p>22 the surgery for the DVT?</p> <p>23 A. I was still in pretty severe pain, so I was</p> <p>24 not very mobile.</p> <p>25 Q. How long did that last? Do you have a</p>	<p>Page 107</p> <p>1 then you had the issue with the hip, how long did that</p> <p>2 last before all of that resolved?</p> <p>3 A. I don't really remember, but I think it</p> <p>4 resolved pretty quickly. Because once the</p> <p>5 inflammation in my right hip calmed down, then I could</p> <p>6 be mobile again and -- and, you know, I was mobile</p> <p>7 again.</p> <p>8 Q. And so once you became mobile, were you</p> <p>9 able to do anything on a day-to-day basis? I know you</p> <p>10 said at some point you became bedridden. I'm trying</p> <p>11 to just figure out was there a time after the issues</p> <p>12 with the DVT and the hip resolved where you were</p> <p>13 mobile before you were bedridden?</p> <p>14 A. I just don't remember.</p> <p>15 Q. Okay. Do you have a recollection as of</p> <p>16 August of 2022, were you -- was there a point in that</p> <p>17 month where you became bedridden?</p> <p>18 A. I believe so. I believe it was August</p> <p>19 sometime.</p> <p>20 Q. Was that in your mind related to the DVT,</p> <p>21 or was that related to the antibabesial treatment?</p> <p>22 A. The treatment.</p> <p>23 Q. And what was -- what were you experiencing</p> <p>24 that made you bedridden?</p> <p>25 A. Just severe symptoms of nausea, dizziness,</p>

<p style="text-align: right;">Page 108</p> <p>1 headaches, weakness. I'm trying to remember what 2 else. Just -- I'm sure there were other symptoms, I 3 just can't remember. Oh, I had severe light and sound 4 sensitivity. 5 Q. Did you say light and sound sensitivity? 6 A. Yeah. 7 Q. Okay. When did that start, the light and 8 sound sensitivity? 9 A. I think in August is my best recollection. 10 Q. How about the dizziness, when did the 11 dizziness start? 12 A. I mean, that's a symptom I had off and on, 13 you know, even before treatment, but it definitely got 14 more severe during treatment, and so I can't even say 15 when it really started. 16 Q. And you said that you -- in August of 2022, 17 you were suffering weakness. When you say weakness, 18 what do you mean? 19 A. Like, I couldn't get out of bed without 20 feeling I was going to collapse. I couldn't get on 21 and off the toilet without help. Didn't have any 22 strength. 23 Q. In -- 24 A. I was -- I was so nauseous, I couldn't eat. 25 I was just so completely out of it.</p>	<p style="text-align: right;">Page 110</p> <p>1 me they -- this is what had to -- had to be to kill 2 off the Babesia. 3 Q. Okay. And so when you say to me, I guess, 4 I wonder, are you guessing or do you have a 5 recollection of that? 6 A. Yes, he was telling me that I needed to do 7 this to -- any -- to kill off the Babesia. And he 8 also, you know, assured me many times that, you know, 9 his daughter had gone through this, and he understood. 10 He was -- you know, how hard it was, and -- and -- but 11 I had to do this to -- to kill it off. 12 Q. This being the regimen he's des -- he's 13 prescribing for you? 14 A. Yes. 15 Q. So this brings us into October of 2022, 16 which is kind of going to bring us into the admission 17 at the hospital for the bowel perforation. So I just 18 want to make sure that I understand. Throughout the 19 regimen that Dr. Lindner had been prescribing to you 20 that we've talked about now for a couple of hours, 21 which included the steroids, am I correct in 22 believing, as you sit here today, you didn't see any 23 benefit from taking any of the steroids he prescribed? 24 A. I mean, at that point -- 25 THE REPORTER: Excuse me.</p>
<p style="text-align: right;">Page 109</p> <p>1 Q. In August of 2022, did you have any 2 communication with Dr. Lindner about the symptoms we 3 just talked about, the weakness, the dizziness or the 4 light and sound sensitivity? 5 A. I mean, I don't know any specifics. It's 6 all in the e-mail record. But, yes, I'm sure I was 7 e-mailing him with this information. 8 Q. But do you have any recollection about -- 9 the e-mails are what they are, so I understand that. 10 I'm just -- part of the deposition process is to see 11 if you remember anything in addition to those e-mails, 12 so that's why I asked the question. 13 As you sit here today, do you have a 14 recollection of anything that was said by you or by 15 Dr. Lindner about those symptoms? 16 A. In the e-mails? 17 Q. No. Is that -- is this -- yeah, either in 18 the e-mails or separate and apart from the e-mails 19 that you recall today. 20 A. I don't remember anything specific. 21 Q. Did -- do you recall him attributing these 22 symptoms to anything? 23 MR. LAMB: Objection to form. You 24 can answer. 25 A. I mean, he -- I guess he just kept telling</p>	<p style="text-align: right;">Page 111</p> <p>1 A. -- I was so sick and thought I was dying, I 2 -- I don't know that I -- I have no idea what was 3 causing that. Was it the steroids? Was it the 4 treatment? Was it the die-off? I mean, I -- I 5 wouldn't know that, but I just knew that I was deathly 6 ill. 7 Q. Well, let me broaden it up a little bit 8 more. We talked about early on in your deposition 9 that in 2021 it was kind of intermittent in the 10 treatment at that point. And then in 2022 it seems 11 like the antibabesial treatment became more 12 aggressive, or at least that's the words used in the 13 summary here with Dr. Lindner. 14 Did you see any benefit to any of the 15 treatment prescribed in any of the -- by Dr. Lindner 16 based on any of the symptoms you were experiencing or 17 not experiencing? 18 A. Could you -- what is it again? 19 Q. Did you -- 20 A. Conor lost -- Conor lost connection. I'm 21 still -- I'm still fine. 22 Q. And you're -- he -- you're good. I can't 23 see Conor because of the paper is up, but if -- 24 MR. LAMB: Go ahead and answer while 25 -- sorry, I'm going to try to get reconnected here.</p>

<p>Page 112</p> <p>1 A. So did I see any benefit? No, I guess I 2 didn't because I was experiencing all these other 3 symptoms and I was deathly ill, so I wasn't sorting 4 out the different symptoms. But also, I wasn't even 5 in a frame of mind to be able to assess if one symptom 6 was better than, you know, oh, is that symptom better? 7 I mean, I just wasn't even able to do that at that 8 time. I was just trying to survive each day, and so I 9 really don't know.</p> <p>10 I mean, I know you said you were 11 going to ask me later about now. But, you know, now I 12 can definitely, you know, assess, like, what -- what 13 symptoms are better, what -- what it helped. But at 14 that time, I couldn't at all.</p> <p>15 Q. So take me to October of 2022. It looks 16 like he -- I know that you go into the hospital, I 17 think it was October 7th of 2022; is that right?</p> <p>18 A. Sounds right.</p> <p>19 Q. Tell me about the days leading up to the 20 hospitalization. Was there any change in any of the 21 symptoms that you recall?</p> <p>22 A. Yeah. About a week before -- not even a 23 week, maybe Saturday or Sunday, and I went in the 24 hospital Friday, so I don't know the dates, but I 25 started with severe pain -- or it -- it didn't start</p>	<p>Page 114</p> <p>1 anything, he responded back to you with?</p> <p>2 A. He thought it was constipation, and so he 3 had us aggressively treating it as constipation and 4 was telling us -- you know, telling me to take this 5 and take that, and lots of different -- lots and lots 6 of things to try to deal with it that way.</p> <p>7 Q. With the constipation, just generally what 8 were the types of things you were doing?</p> <p>9 A. I mean, taking products, I don't remember 10 the names of all of them. Sena -- Sena something. 11 Doing -- taking large doses of vitamin C to kind of 12 try to flush -- do a flush. Taking MiraLAX. 13 Suppository enema. I can't even remember what all we 14 tried thinking it was con -- wrongly thinking it was 15 constipation.</p> <p>16 Q. Okay. And in that same time frame when you 17 started to get the new abdominal pain that you were 18 talking about until the time you go to the hospital, 19 did you seek medical opinions from anybody else other 20 than Dr. Lindner about those symptoms?</p> <p>21 A. No. Well, let me clarify that. I see a -- 22 I used to see many years ago a natural -- she's not a 23 physician, so I don't know if that qualifies as 24 medical, but she -- I can't remember her -- her 25 certification, certified natural health practitioner</p>
<p>Page 113</p> <p>1 severe, sorry. I started with pain in my abdomen, and 2 it progressively got worse each day for that week.</p> <p>3 MS. SHWED: Okay. Patrick, you can 4 take down the exhibit so that we can see the full 5 screen. Thank you.</p> <p>6 Q. And in the days that you began -- once you 7 began experiencing the abdominal pain that you said 8 progressively got worse, was there communication with 9 Dr. Lindner by you?</p> <p>10 A. I'm sorry, repeat the question?</p> <p>11 Q. So in the days before -- so once you 12 started experiencing the abdominal pain that you just 13 described progressively got worse over a few days, in 14 that time frame did you have any contact with Dr. 15 Lindner about that, those symptom?</p> <p>16 A. Oh, yeah, we were -- I was e-mailing him 17 probably daily, if not -- if not more than once a day 18 and he was responding.</p> <p>19 Q. Did you -- so what were the -- do you 20 recall what were the questions you were asking him in 21 that time frame?</p> <p>22 A. Well, just letting him know about this new 23 pain, and it was progressively worse and getting worse 24 every day. And obviously huge concern for that.</p> <p>25 Q. And can you tell me from memory what, if</p>	<p>Page 115</p> <p>1 or something like that. And we called her, but not to 2 get her opinion, but it was to have her assist us in 3 what do you have that could help me with constipation. 4 And she suggested -- or she had things I needed to do 5 an enema.</p> <p>6 Q. Okay. And so what was her name?</p> <p>7 A. Margie Lung.</p> <p>8 Q. Lung, L-U-N-G?</p> <p>9 A. Yes.</p> <p>10 Q. Okay. And I'm sorry, did you say that she 11 was able to provide you things for an enema? Is that 12 what you said?</p> <p>13 A. Right, the products we needed for it.</p> <p>14 Q. Okay.</p> <p>15 A. I knew it was something she had and ...</p> <p>16 Q. And is she -- is she close to your home 17 or ...</p> <p>18 A. Yeah. Yes.</p> <p>19 Q. And how many times did you use the enema, 20 do you know?</p> <p>21 A. Just once. Just -- well, as far as I 22 remember.</p> <p>23 Q. Okay. And was there any benefit from the 24 enema?</p> <p>25 A. No.</p>

<p>Page 116</p> <p>1 Q. In that -- from the time the new abdominal 2 pain started until you go to the hospital, were there 3 any bowel movements?</p> <p>4 A. I think it's in those e-mails with -- I'm 5 sure it's in those e-mails with him. I think maybe a 6 little bit, not much.</p> <p>7 Q. And in this week how much were you eating?</p> <p>8 A. None, I don't think. I mean, maybe I was 9 sipping on soup maybe -- oh, I might have been 10 nibbling on crackers because of the nausea, but I 11 wasn't really eating much.</p> <p>12 Q. So not, like, having a breakfast, a lunch 13 or a dinner?</p> <p>14 A. No.</p> <p>15 Q. Do you recall there being any discussion 16 with Dr. Lindner about your husband helping press on 17 your stomach to see if there was anything going on, if 18 you were tender, not tender? Do you remember any of 19 that?</p> <p>20 A. I remember my husband telling me he needed 21 to do that because Dr. Lindner told him to do it. 22 That's kind of all I remember about it. I was pretty 23 out of it.</p> <p>24 Q. Okay. And when you say do that, what do 25 you mean?</p>	<p>Page 118</p> <p>1 Like, what was going on with you to make you think 2 that?</p> <p>3 A. Because I couldn't stand up. I was 4 nauseous. I was severely nauseous. I was severely in 5 pain, practically doubled over in pain, and couldn't 6 go to the bathroom, you know, nothing. It just didn't 7 seem right.</p> <p>8 Q. Can you tell me how long you were doubled 9 over in pain before you went to the emergency room?</p> <p>10 A. I mean, I use that phrase for the one time 11 I stood up to go to the bathroom, otherwise, I'm 12 laying in bed. So, you know, I just remember being in 13 so much pain I really couldn't stand up.</p> <p>14 Q. When you were laying in bed, were you 15 doubled over in pain?</p> <p>16 A. I mean, I was curled up, I guess. I don't 17 know if you would describe it as doubled up -- doubled 18 over when you're laying down. I don't know.</p> <p>19 Q. Okay. So do you remember going to the 20 emergency room at that -- like, what's your first 21 memory once you decide, okay, I'm going to go to the 22 hospital and you actually do go to the hospital? 23 What's your first memory?</p> <p>24 A. I just remember feeling really out of it. 25 I didn't have the strength or something to open my</p>
<p>Page 117</p> <p>1 A. Like, pressing on my stomach to see if it 2 was tender or something.</p> <p>3 Q. And do you remember if it hurt when he 4 would -- when your husband would press? Was there 5 pain or not pain? Do you remember any of that?</p> <p>6 A. I was in pretty bad pain.</p> <p>7 Q. And during this week was -- do you know if 8 your husband was communicating back and forth with 9 Dr. Lindner?</p> <p>10 A. I believe so, because I don't think I was 11 in any shape to do that.</p> <p>12 Q. Okay. Do you have any recollection of 13 anything your husband said, oh, I talked to 14 Dr. Lindner and he said?</p> <p>15 A. Oh, no, not particularly.</p> <p>16 Q. Okay. So why is it that you recall going 17 to the hospital on the 7th? Like, why -- did anything 18 change that caused you to go to the hospital on the 19 7th?</p> <p>20 A. I mean, the pain definitely was 21 progressively getting worse. It was pretty unbearable 22 at that point. I really thought I was dying. And I 23 could not -- did not have the strength to go to the 24 bathroom. And I just kept thinking I was dying.</p> <p>25 Q. And why were you thinking you were dying?</p>	<p>Page 119</p> <p>1 eyes. I remember my eyes were closed. I couldn't -- 2 it's like all I remember is the sounds of EMS coming 3 into our house and talking to me, and I just couldn't 4 -- I don't remember saying much other than, I'm in so 5 much pain, just make it stop. And, I mean, I kind of 6 remember them loading me into the ambulance and taking 7 me to the hospital.</p> <p>8 Q. Okay. And then what do you remember about 9 the hospital, if anything, once you got there?</p> <p>10 A. Just writhing in pain and begging them to 11 make it stop. And they did some tests, I think a CAT 12 scan or MRI or something. And I just don't remember a 13 whole lot. I guess they must have finally -- I don't 14 know, I shouldn't guess, but I was kind of out of it 15 so I don't remember a whole lot. And then they 16 transferred me, put me back in an ambulance, and every 17 bump in the road was excruciating.</p> <p>18 Q. That was -- are you okay to continue? Do 19 you need to take a break?</p> <p>20 A. Sorry.</p> <p>21 Q. No. No, there's no reason to apologize.</p> <p>22 A. Okay.</p> <p>23 Q. You sure?</p> <p>24 A. Yeah, we can take a break.</p> <p>25 Q. Okay. You want to come --</p>

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1 MR. LAMB: Maybe we should take a
2 break, kind of like a lunch break anyway. How much
3 time do you think you'll be able to --
4 THE WITNESS: Any time is fine --
5 MR. LAMB: Okay.
6 THE WITNESS: -- I don't need a lot.
7 MR. LAMB: What do you guys want to
8 do, like 20 minutes, 30 minutes?
9 MS. SHWED: Oh, I don't know. I'm
10 not going to eat, so I'm happy to come back --
11 THE REPORTER: You want to go off the
12 record?
13 MR. LAMB: Yeah, go off the record.
14 MS. SHWED: Yes.
15 THE VIDEOGRAPHER: The time is 12:48
16 p.m. We are now off the video record.
17 (Brief recess was taken.)
18 THE VIDEOGRAPHER: On the video
19 record, 1:16 p.m.
20 BY MS. SHWED:
21 Q. Hi, Mrs. Wolking. We took a short break to
22 have a lunch break. Are you ready to answer some more
23 questions for me?
24 A. Yes.
25 Q. I think the last question we were talking

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1 about we had gotten into your visit -- your emergency
2 room visit to Loudoun Hospital. And you had said that
3 they -- they had run some tests, and then they had put
4 you back in an ambulance to take you -- was it to a
5 different facility?
6 A. Yeah. And actually, the first facility was
7 Corn -- Cornwall, it's just an ER.
8 Q. Okay.
9 A. It's -- it's an old hospital here that
10 they've converted to just an ER. So that's where they
11 -- it's closer, so that's where they took me
12 initially.
13 Q. I was wondering when I read the records why
14 they transported you. Now I understand. So it was --
15 you went to a place, it was just an ER. And then the
16 ER transferred you to Loudoun Hospital?
17 A. Correct.
18 Q. Okay. And did you -- do you have -- did
19 you have an understanding at the time you were being
20 sent to Loudoun Hospital why you were being sent
21 there?
22 A. That I was going to need emergency surgery.
23 Q. Okay. Did you know on your way to Loudoun
24 Hospital that you had a bowel perforation?
25 A. I don't think I did. I was pretty out of

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1 it.
2 Q. Okay. So what do you -- do you have a
3 memory of arrive -- like, you were explaining to me
4 before we took the break that the ambulance trip from
5 the ER to Loudoun Hospital was painful for you, that
6 every bump was causing you pain in the transport. How
7 far away are they from one another?
8 A. I'm terrible with that kind of stuff. 15
9 minutes maybe.
10 Q. Okay. Do you know, did they transport you
11 with lights and siren?
12 A. I don't know that.
13 Q. Okay. Did your husband go in the ambulance
14 with you, do you know?
15 A. I don't know.
16 Q. Okay. So do you have a memory of arriving
17 at Loudoun Hospital?
18 A. Not really.
19 Q. Well, tell me what your first memory is at
20 the hospital that you -- you can distinctly remember
21 from Loudoun Hospital.
22 A. I kind of vaguely remember the doctor being
23 there and talking about the surgery that she was going
24 to do, but I really don't remember much of that. The
25 really biggest memory is waking up after the surgery

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1 and just being shocked -- in shock maybe that I had
2 this huge open abdominal incision and a colostomy and
3 -- it was just shock.
4 Q. Okay. So I just want to make sure the
5 record is clear. And I -- and I think I'm accurate in
6 saying, other than some vague memories of arriving at
7 the emergency room, your first real clear memories of
8 that hospital would be after the surgery; is that
9 accurate?
10 A. I guess. I mean, I kind of remember a
11 little bit being there with my husband talking to the
12 surgeon about what she's going to do, but I really
13 don't remember anything she said.
14 Q. Okay. So other than saying to me you
15 remember generally that conversation, you don't recall
16 any specifics about the conversation with the surgeon?
17 A. No.
18 Q. Okay. So you got -- does there come a
19 point in time where you have a recollection of having
20 a discussion -- was it doctors -- is it Sutter, Kelly
21 Sutter?
22 A. Yes.
23 Q. Do you have a recollection of speaking to
24 Dr. Sutter after the surgery about surgery?
25 A. Yes.

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1 Q. Tell me what you remember her saying to you
2 and you saying to her in that conversation.

3 A. I mean, just her explaining that there was
4 a couple different perforations. And I remember her
5 saying it just -- she was trying to repair the
6 perforation, but she couldn't because my intestines
7 just kind of disintegrated in her hands, she said. So
8 she was explaining why she had to give me the
9 colostomy.

10 Q. Okay. Did she explain to you what she
11 thought caused your intestines to be in the condition
12 that she found them in surgery?

13 A. No, not at that time. I think we had a
14 conversation a month later when I had my follow-up
15 visit in her office where she said to me that she
16 thought it was from the steroids, because she said
17 she's seen many perforations, but nothing ever like
18 that.

19 Q. Okay. So the con -- the conversation that
20 you remember that you just testified to, that was when
21 you were an outpatient already in her outpatient
22 office; is that right?

23 A. No, I was inpatient at the Encompass Rehab
24 Hospital.

25 Q. Oh, the rehab hospital. Okay.

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1 A. And they transported me by -- I don't -- I
2 don't know if it's an ambulance or by, you know, a
3 medical transport from the rehab to -- I was still not
4 walking, so, you know, I was still -- I was on a
5 gurney, so they transported me to her office that way.

6 Q. Okay. So let's focus on that -- the memory
7 of the hospitalization before the rehab hospital.

8 Okay. So tell me, other than that one conversation
9 you just testified to with Dr. Slater [sic], the
10 surgeon, do you remember any other conversations with
11 her about what caused the bowel perforation while you
12 were a patient at Loudoun Hospital before you go to
13 the rehab hospital?

14 A. None that I recall.

15 Q. Okay. Do you remember speaking to any
16 other treating doctors at Loudoun Hospital during that
17 same time frame, after surgery but before you go to
18 the rehab surgery [sic], about what anybody thought
19 would have been the cause of the bowel perforation?

20 A. Yeah, there was lots of discussions with
21 the hospitalist, the infectious disease doctors, that
22 they just -- yeah, they indicated that it was crazy
23 that I was on these high doses, and they had never
24 seen anything like it and things like that.

25 Q. All right. So let's break it down to the

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1 hospitalist. Do you remember the -- I wrote down one
2 name that I saw from the records. His name was Dr.
3 A-S-W-A-D, Aswad, who was a hospitalist. I think you
4 may have had other hos -- was it one hospitalist in
5 charge of you, or was there different ones while you
6 were in the hospital?

7 A. There was different ones, but Aswad was one
8 of them, yeah.

9 Q. Okay. And so let's focus just on first the
10 bowel perforation. Can you -- not so much the dosage
11 of steroids, we'll get to that in a second. But was
12 there any conversations with Dr. Aswad about the cause
13 of -- what he thought was the cause of your bowel
14 issues and your bowel perforation?

15 A. I mean, I don't remember any specific
16 conversations except there was definitely many
17 conversations that gave the general -- that have the
18 general idea of the steroids were the problem and the
19 main cause and how crazy the doses were and who is
20 this crazy -- you know, they wanted to know who it was
21 and what his name was. And so there was many
22 conversations like that that I remember.

23 Q. Okay. But just so I'm clear, so it's your
24 understanding that Dr. Aswad told you that it was his
25 opinion that the steroid dose caused the perforation;

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1 is that correct?

2 A. I can't remember any one specific
3 conversation where he said those exact words, but
4 definitely there was much discussion about, yes, they
5 believed that it was the cause. It was -- it was just
6 -- yeah, it was just the belief that that was the
7 cause.

8 Q. And -- and when you say that was the cause,
9 are you talking about the steroids?

10 A. Yes.

11 Q. Okay. And so I know that you talked to me,
12 you said that there were many conversations about the
13 steroid dosing, is that true, while you were --

14 A. Yes.

15 Q. -- in the hospital?

16 A. Yes.

17 Q. Just, I mean, I'm sure you don't remember
18 the specifics of it, but were -- can you at least
19 break it down, was there -- who was -- was there -- do
20 you remember the name of the infectious disease doctor
21 you had referenced earlier who took care of you in the
22 hospital?

23 A. I don't remember the name.

24 Q. Do you remember, was it more than one
25 infectious disease person while you were in the

<p>Page 128</p> <p>1 hospital?</p> <p>2 A. I believe there was.</p> <p>3 Q. Okay. Can you tell me just generally from</p> <p>4 your conversations with the infectious disease</p> <p>5 physicians, whether it was more than one or one, what</p> <p>6 was your understanding as to their thoughts about the</p> <p>7 steroid dose that was being prescribed to you?</p> <p>8 A. I really don't know which doctor was</p> <p>9 talking about what, you know. Whether it was</p> <p>10 infectious disease or whether it was the hospitalist,</p> <p>11 I really couldn't tell you.</p> <p>12 Q. Okay. So in your mind today, you can't</p> <p>13 distinguish conversations from the hospitalist versus</p> <p>14 infectious disease physicians; is that accurate?</p> <p>15 A. Not specific conversations, no.</p> <p>16 Q. All right. So just then tell me generally</p> <p>17 you've had conversations with both the hospital</p> <p>18 service and the infectious disease service while you</p> <p>19 were a patient at Loudoun Hospital; is that accurate?</p> <p>20 A. I'm sorry, say that again?</p> <p>21 Q. Did you have conversations with the</p> <p>22 hospitalists and the -- the infectious disease</p> <p>23 physicians who were treating you about steroid -- the</p> <p>24 steroid dose?</p> <p>25 A. Yes. But the vast majority of the</p>	<p>Page 130</p> <p>1 after the surgery, okay, so that time frame -- and</p> <p>2 would the source of any belief that you have about the</p> <p>3 steroid doses that were being prescribed to you by</p> <p>4 Dr. Lindner in that time frame when you were in the</p> <p>5 hospital, would that come from the doctors who were</p> <p>6 treating you?</p> <p>7 A. The discussions about steroids?</p> <p>8 Q. Yeah, in that time frame. So --</p> <p>9 A. Yeah, we were -- I know there was lots of</p> <p>10 discussions about how to continue, you know, not --</p> <p>11 not cause steroid withdrawal and to continue steroids,</p> <p>12 but obviously not the level I was taking.</p> <p>13 I remember the -- again, I don't know</p> <p>14 if it was the infectious disease or the hospitalist,</p> <p>15 but I remember specifically a conversation where he</p> <p>16 was very concerned that getting me off the steroids</p> <p>17 too quick would be harmful to me, but also keeping me</p> <p>18 on the steroids is harmful because it -- it inhibits</p> <p>19 healing. And I remember him talking a lot about that,</p> <p>20 that that was really difficult for them to, you know,</p> <p>21 find that middle ground.</p> <p>22 Q. Okay. How about as far as, was there any</p> <p>23 comment about you were on a high dose of steroids</p> <p>24 coming into the hospitalization, and as a result of</p> <p>25 that, we think it caused you to suffer these things?</p>
<p>Page 129</p> <p>1 conversations were between my family members and the</p> <p>2 doctors. And I was present, I'm sure, for some and</p> <p>3 not for others, but I really wasn't a big participant</p> <p>4 in the conversations because I was deathly ill.</p> <p>5 Q. So do you -- as you sit here today, can you</p> <p>6 -- can you generally summarize for me any conversation</p> <p>7 that you had with any of the doctors who were treating</p> <p>8 you about the steroids?</p> <p>9 A. I cannot name any specific conversation I</p> <p>10 had, no.</p> <p>11 Q. Okay. So then would you have gotten your</p> <p>12 information -- while you were a patient at the</p> <p>13 hospital, would you have received information from the</p> <p>14 family members who were talking to the doctors?</p> <p>15 A. No. I was hearing everything that was</p> <p>16 going on, I just wasn't participating much.</p> <p>17 Q. Were you able to process what they were</p> <p>18 saying?</p> <p>19 A. With difficulty.</p> <p>20 Q. Okay.</p> <p>21 A. And probably not -- not completely at that</p> <p>22 time.</p> <p>23 Q. Okay. So during -- let me -- I just want</p> <p>24 to make sure I understand what your recollection is.</p> <p>25 So during the time that you're at Loudoun Hospital</p>	<p>Page 131</p> <p>1 Was there any conversation with the doctors at Loudoun</p> <p>2 Hospital to address that topic?</p> <p>3 A. Yeah, I think that I was hearing them say</p> <p>4 that the steroids caused the perforation.</p> <p>5 Q. Okay. And can you tell me more</p> <p>6 specifically who the doctors were other than doctors?</p> <p>7 A. Just those two, the hospitalist and the</p> <p>8 infectious disease are the two that I can think of.</p> <p>9 Q. Okay. Any other discussions with any other</p> <p>10 doctors at Loudoun Hospital about steroids that you</p> <p>11 haven't told me so far that you remember?</p> <p>12 A. I mean, if other doctors came in my room,</p> <p>13 which it was a constant stream, so, you know, I guess</p> <p>14 I'm not sure who we would have had these discussions</p> <p>15 with, to be honest. I -- those are the two main</p> <p>16 categories that I know of that -- I probably --</p> <p>17 actually, there was probably an endocrinologist in</p> <p>18 there, too. So I don't know who I had these</p> <p>19 discussions or heard these things from.</p> <p>20 Q. But am I correct in believing the topics</p> <p>21 that you talked to the doctors about were what I'll</p> <p>22 call the tapering balance of the steroids is the first</p> <p>23 one you told me about; and then the second one is that</p> <p>24 the steroid dose caused or led to the bowel</p> <p>25 perforation, those two topics?</p>

<p>Page 132</p> <p>1 A. Yes.</p> <p>2 Q. Were there any other topics that were</p> <p>3 just -- even generally, that are covered under those</p> <p>4 two topics with any of the physicians at Loudoun</p> <p>5 Hospital?</p> <p>6 A. The doctors talked to us about -- talked to</p> <p>7 me about?</p> <p>8 Q. About steroids, we're just limiting it to</p> <p>9 the steroids.</p> <p>10 A. Oh, the steroids?</p> <p>11 Q. Yeah.</p> <p>12 A. What I should be taking now and what the --</p> <p>13 what it did to me, the damage it did, no, I can't</p> <p>14 think of any other thing but the steroids.</p> <p>15 Q. So you said what damage it did to you.</p> <p>16 What damage did it do to you that you understood while</p> <p>17 you were a patient at Loudoun Hospital?</p> <p>18 A. The -- the perforation.</p> <p>19 Q. Okay. Anything else?</p> <p>20 A. I mean, the subsequent infection and sepsis</p> <p>21 and all that.</p> <p>22 Q. Okay. And the infection and the sepsis was</p> <p>23 as a result of the bowel perforation and then the</p> <p>24 surgical repair, is that your understanding?</p> <p>25 A. Yes.</p>	<p>Page 134</p> <p>1 about you had decided at some point that you wanted to</p> <p>2 be on palliative care versus medical care.</p> <p>3 Do you have any memory of that --</p> <p>4 making that decision while you were at the hospital?</p> <p>5 A. Yes.</p> <p>6 Q. Okay. Tell me what -- why it was that you</p> <p>7 decided that way at that time.</p> <p>8 A. I just felt like the suffering was too</p> <p>9 great. I was in pain. I couldn't sleep. They</p> <p>10 couldn't -- I was being poked to get -- draw blood</p> <p>11 multiple times a day and they couldn't get it, so it</p> <p>12 was awful constantly.</p> <p>13 I had a midline put in so they could</p> <p>14 supposedly -- so they could draw -- draw blood, and</p> <p>15 then that went bad. And then they put in another</p> <p>16 midline, and that went bad. Then they put in a PICC</p> <p>17 line. And it's just each thing was just torture, and</p> <p>18 it was just -- I just reached a point where I just</p> <p>19 couldn't do it anymore.</p> <p>20 Q. And you say to me -- and you use the word</p> <p>21 suffering when you were first describing what you were</p> <p>22 going through. And I think -- so obviously would pain</p> <p>23 be included in the suffering?</p> <p>24 A. Yes, I did say pain, yeah. Yes.</p> <p>25 Q. Was there any -- when you say suffering, is</p>
<p>Page 133</p> <p>1 Q. Okay.</p> <p>2 A. Well, I mean, the infection wasn't from the</p> <p>3 surgical repair but from the perforation, yes.</p> <p>4 Q. Right. Okay. And so there -- you know,</p> <p>5 there's a five page or so letter written by, is it Mr.</p> <p>6 Underhill, is he -- do you know Mr. Underhill?</p> <p>7 A. Yeah, that's my brother, but I don't know</p> <p>8 anything about a letter. Sorry.</p> <p>9 Q. Yeah, I was going to ask you. He had</p> <p>10 submitted as part -- or I should say, we received as</p> <p>11 part of the litigation process a typewritten -- if</p> <p>12 memory serves me correctly, it's about five pages.</p> <p>13 But it sounds to me like you have not reviewed that</p> <p>14 letter; is that accurate?</p> <p>15 A. That is accurate.</p> <p>16 Q. Okay.</p> <p>17 A. At least to my memory.</p> <p>18 Q. So while you're in the hospital -- in</p> <p>19 Loudoun Hospital now, so if my notes are correct, it</p> <p>20 looks like you were there about three weeks. You went</p> <p>21 on October 7th and you were discharged on the 28th.</p> <p>22 Is that consistent with your recollection?</p> <p>23 A. That sounds about right.</p> <p>24 Q. And it looks like in the beginning portion</p> <p>25 of it there are discussions in Mr. Underhill's summary</p>	<p>Page 135</p> <p>1 there anything else you would include in that</p> <p>2 description other than pain? I'm just trying to under</p> <p>3 -- and I'm not doubting the pain and suffering. I'm</p> <p>4 just -- I just want to make sure I'm not missing</p> <p>5 something symptom-wise.</p> <p>6 A. Well, I think the things I named.</p> <p>7 Q. Okay.</p> <p>8 A. Not being able to sleep is -- is huge. And</p> <p>9 pain everywhere. I had pain -- I -- I was so full of</p> <p>10 fluid. I was completely swollen everywhere, and</p> <p>11 literally my arms were leaking just from all that, and</p> <p>12 then they'd get raw. And I don't know if they were</p> <p>13 infected, but they were, you know, having to treat</p> <p>14 them.</p> <p>15 And it just -- every movement was</p> <p>16 painful and just -- yeah, lots of pain. And I think</p> <p>17 -- well, the pain of my abdomen, of course, was</p> <p>18 painful because I had an open abdominal wound. And</p> <p>19 they had to change that dressing regularly, and that</p> <p>20 was extremely painful. And, yeah, just pain.</p> <p>21 Q. Okay. And was there -- I presume were they</p> <p>22 giving you pain medication when you were a patient at</p> <p>23 Loudoun, do you know?</p> <p>24 A. Yes.</p> <p>25 Q. And was that in any way effective to</p>

<p style="text-align: right;">Page 136</p> <p>1 resolve the pain?</p> <p>2 MR. LAMB: Object to form.</p> <p>3 A. I mean, I didn't -- I didn't think it was</p> <p>4 helping enough, obviously, since I was still in pain.</p> <p>5 I was also excruciatingly nauseous and, you know,</p> <p>6 struggling to get anything down and -- including, you</p> <p>7 know, pills that they were trying to make -- huge</p> <p>8 pills that they were trying to get me to take.</p> <p>9 I had low potassium a lot, so they</p> <p>10 were trying to get that up. And it was just --</p> <p>11 everything was just a constant -- just a battle to try</p> <p>12 to -- I just felt like I couldn't survive it anymore.</p> <p>13 Q. Okay. And am I correct in understanding</p> <p>14 that whatever they gave you for -- whatever they were</p> <p>15 giving you for pain when you were a patient at Loudoun</p> <p>16 Hospital wasn't sufficient enough to control your</p> <p>17 pain, at least to your recollection today?</p> <p>18 A. I was still in pain, so ...</p> <p>19 Q. Okay. And what was the reason -- was pain</p> <p>20 the reason you couldn't sleep, or was there some other</p> <p>21 reason that you couldn't sleep?</p> <p>22 A. I have no idea.</p> <p>23 Q. Okay. And then it looks like there's, I'll</p> <p>24 call it a family meeting, where there's discussions</p> <p>25 with you, at least according to this Mr. Underhill</p>	<p style="text-align: right;">Page 138</p> <p>1 hearing everything they were saying. I don't think I</p> <p>2 ever opened my eyes because that felt like too much</p> <p>3 work. But, you know, I just was hearing everything</p> <p>4 they were saying, and I just -- I think I just really</p> <p>5 wanted them to stop hounding me, so I said, fine, I'll</p> <p>6 do whatever you want me to do.</p> <p>7 Q. Okay. And so once you made the decision to</p> <p>8 not be on -- you called it -- on hospice and then go</p> <p>9 back to medical care, were they -- were the people at</p> <p>10 Loudoun Hospital ever able to control your pain after</p> <p>11 that, or were you still in pain?</p> <p>12 A. Yeah, I was still in pain. So I -- I mean,</p> <p>13 they were trying to control my pain. They were giving</p> <p>14 me different things. But, yeah, I was still in pain.</p> <p>15 Q. Okay. And when you were on the pain</p> <p>16 medication in hospice, were you mentally clear? Do</p> <p>17 you have clear memories of what was going on, or were</p> <p>18 you kind of out of it?</p> <p>19 A. My understanding --</p> <p>20 Q. Before coming --</p> <p>21 A. My understanding is that once I went into</p> <p>22 hospice, they gave me enough that I finally was able</p> <p>23 to sleep, and I slept a lot, for, like, maybe 24 hours</p> <p>24 or more is my -- what I was told. I wasn't awake to</p> <p>25 know, but I'm pretty sure that's how it went.</p>
<p style="text-align: right;">Page 137</p> <p>1 summary, about trying to convince you to agree to go</p> <p>2 back to what I'll call medical treatment versus</p> <p>3 palliative care. Do you remember that?</p> <p>4 A. Yes.</p> <p>5 Q. Okay. And tell me what you remember about</p> <p>6 that conversation. Because it -- am I correct that</p> <p>7 you ultimately decided to go off palliative care and</p> <p>8 then go back to what I'll call medical care after that</p> <p>9 discussion?</p> <p>10 A. Yes.</p> <p>11 Q. Okay. So tell me what you -- what you</p> <p>12 remember about the discussion and why -- what caused</p> <p>13 you to change your mind.</p> <p>14 A. Well, when they put me on hospice, they</p> <p>15 gave me more pain medication, and I was able to sleep</p> <p>16 for the first time. And so they let the medication</p> <p>17 wear off so that I would wake up because they wanted</p> <p>18 to talk to me. And so when I woke up, my brother and</p> <p>19 my sister and my daughter were there. And they just,</p> <p>20 you know, started talking to me about wanting me to</p> <p>21 fight harder and to want -- to want to get -- to live.</p> <p>22 And they just hounded me -- hounded me for a very long</p> <p>23 time and wouldn't leave me alone until I agreed.</p> <p>24 And I, you know, again am half</p> <p>25 drugged, you know, I was half out of it, but I was</p>	<p style="text-align: right;">Page 139</p> <p>1 Q. Okay. So you don't have any memory of that</p> <p>2 24 hours, but the rest of the hospitalization you have</p> <p>3 a clear memory of?</p> <p>4 A. I wouldn't call it clear, but, yes, I have</p> <p>5 memories.</p> <p>6 Q. Okay. And do you -- you told me about the</p> <p>7 conversations that you had with the doctors that you</p> <p>8 remember so far. Did you ever talk to anybody about</p> <p>9 why you were still in pain, and was there anything</p> <p>10 they could do to help with the pain once you come from</p> <p>11 hospice, you know, to medical care?</p> <p>12 A. Yeah, I mean, I was asking them all the</p> <p>13 time for more pain meds. Just that I was in pain,</p> <p>14 and -- yeah, I think -- I'm sure I was asking</p> <p>15 regularly for more pain meds.</p> <p>16 Q. Was there any explanation that you recall</p> <p>17 today as to why they couldn't control your pain better</p> <p>18 than what you described?</p> <p>19 A. Best I can remember, it was just a lot of</p> <p>20 discussion of, you know, coming off steroids was</p> <p>21 causing the pain, the overall pain. Obviously, not</p> <p>22 the abdominal -- necessarily the abdominal pain, but</p> <p>23 the everywhere pain. And that they just didn't really</p> <p>24 know how to control it.</p> <p>25 Q. And I know from looking at the hospital</p>

<p style="text-align: right;">Page 140</p> <p>1 records that there was -- in Mr. Underhill's summary 2 that there were concerns about how the steroids should 3 be tapered. Do you remember any conversations about 4 that? 5 A. I remember lots of conversation. That was 6 like the topic of discussion all the time was trying 7 to figure out, and nobody really knew the right way to 8 taper from that high of a dose, you know. And I'm 9 sure at times I expressed concern that they were 10 tapering too fast and that, you know -- but -- so 11 there was a lot of discussion back and forth of how do 12 you do the taper and what is too fast, and they -- 13 they did what they thought was best. 14 Q. Was there any discussion about the risks of 15 tapering too fast that you recall with doctors at 16 Loudoun Hospital? 17 A. I mean, just that it's not good to taper 18 too fast, and I -- I kind of already knew that, so I 19 don't know that we discussed details of what that 20 meant. 21 Q. Was there any discussions about any 22 potential dangers if you taper too slow? 23 A. Yeah, that's the -- when the doctor, as I 24 already said, had said that, you know, it could 25 inhibit healing, and so it was really -- he felt it</p>	<p style="text-align: right;">Page 142</p> <p>1 A. I was still on IV. 2 Q. Okay. And then how about as far as the 3 steroids, do you know what steroids you were -- were 4 -- I'll ask you, but my guess is you'll probably tell 5 me you don't know. But do you know ultimately what 6 steroids you were given at the hospital -- 7 A. No. 8 Q. -- by name? 9 A. Yeah. 10 Q. Okay. And no dosages, right? 11 A. No. 12 Q. Okay. How about as far as when you go to 13 the rehab, do you know -- and if you answered this, 14 I'm sorry. Were you on steroids when you went to the 15 rehab? Were you still taking steroids? 16 A. Yes. 17 Q. Do you know which ones you were taking 18 then? 19 A. I don't know. 20 Q. Okay. Was the pain any better at -- when 21 you were at the rehab versus when you were at Loudoun 22 Hospital from -- not so much -- I'll ask you about the 23 abdomen and the surgical site separately. But when 24 you say you were in pain, was it more your whole body 25 pain?</p>
<p style="text-align: right;">Page 141</p> <p>1 was critical to get me off quicker. And I think even, 2 you know, the doctors -- each doctor had their own 3 objective. So the endocrinologist's objective was to 4 get me off of them quick. And -- but the -- you know, 5 the one doctor was more worried about the healing, and 6 -- you know, so they all had their own objective of 7 what was important. And, you know, my objective was 8 to be -- obviously, I wanted to heal well, but I also 9 wanted to be out of pain. 10 Q. Yeah. So is there a point in time where 11 you're -- you're still at Loudoun Hospital that your 12 pain is controlled to your satisfaction and it's not 13 unbearable anymore? 14 A. Yeah, maybe like right before I was 15 discharged to rehab. I mean, I might have gotten a 16 little better. But I don't really remember. I guess 17 I don't remember specifically. 18 Q. Okay. And then do you -- when you go to 19 rehab, do you know, are you still on the steroids or 20 -- and pain medication when you're transferred from 21 Loudoun Hospital to the rehab facility? 22 A. I believe so. 23 Q. And how were you getting the medica -- the 24 pain medication at the rehab, was it injection or were 25 they pills, do you know?</p>	<p style="text-align: right;">Page 143</p> <p>1 A. Yes. 2 Q. Okay. And so was it any different when you 3 came at the rehab and was still -- were you still 4 experiencing the all body pain? 5 A. Yes. 6 Q. Was there ever a point where it was 7 controlled at the rehab? 8 A. I mean, I would say it was controlled. I 9 mean, I was still in pain. I was still taking pain 10 meds, but then -- then you add into the mix that I'm 11 doing rehab, like, rigorous rehab and physical 12 exertion and, you know, that added a different element 13 of, you know, pain. So they were trying to stay on 14 top of that as well. 15 Q. So when you go to rehab, you still have 16 your colostomy; is that correct? 17 A. Yes. 18 Q. And who was taking care of it at the rehab? 19 Was it something that you could do on your own or was 20 it something they were doing or a combination of 21 something? 22 A. It started out with them doing it, just 23 like in the hospital at Loudoun. And -- but after -- 24 I think within a week they told me I needed to start 25 taking care of it.</p>

<p style="text-align: right;">Page 144</p> <p>1 Q. Okay. And so explain to me in general</p> <p>2 terms what you had to do to take care of the</p> <p>3 colostomy.</p> <p>4 A. You have to empty the bag regularly and</p> <p>5 change the -- how it changed the bag that attaches to</p> <p>6 you. And it would break all the time. So had to deal</p> <p>7 with messes and just it coming loose or whatever. So</p> <p>8 it was just a constant vigilance of wash --</p> <p>9 (Background interruption.)</p> <p>10 Q. Oh, I'm sorry, I don't think -- you can</p> <p>11 continue. I don't know what happened there.</p> <p>12 A. Just a constant, you know, being vigilant</p> <p>13 all the time to watch it and make sure it's not</p> <p>14 leaking or make sure it's not breaking loose or</p> <p>15 emptying it. Or, you know, if it's -- if it's too</p> <p>16 thick, taking medicine. If it's too thin, taking</p> <p>17 medicine. Watching what I eat so -- so that it is the</p> <p>18 right consistency. And, you know, there was just so</p> <p>19 many dos and don'ts about how to take care of it,</p> <p>20 but ...</p> <p>21 Q. And then as far as the rehab itself, just</p> <p>22 explain to me while you were at the hospital, what --</p> <p>23 you said it was -- I think you used the word rigorous.</p> <p>24 What -- what were they doing for you there?</p> <p>25 A. Well, I wasn't able to sit or stand when I</p>	<p style="text-align: right;">Page 146</p> <p>1 instructions, so I'm not -- I'm not real sure.</p> <p>2 Q. How was your pain level when you were being</p> <p>3 discharged? You know, sometimes they use the scale in</p> <p>4 the hospital, zero being no pain, 10 being the worst</p> <p>5 pain that you ever experienced. Is there any way you</p> <p>6 can describe for me on that -- that zone or --</p> <p>7 A. I have no memory of -- you know, at</p> <p>8 discharge what it was.</p> <p>9 Q. Okay. How about in --</p> <p>10 A. It probably wasn't the worst, you know,</p> <p>11 because --</p> <p>12 Q. Right --</p> <p>13 A. -- it was definitely worse when I was at</p> <p>14 Loudoun.</p> <p>15 Q. And so does there come a point in time when</p> <p>16 you're not taking pain medication anymore --</p> <p>17 A. Yes.</p> <p>18 Q. -- on a daily basis?</p> <p>19 A. No, but I'm going to say we have it in</p> <p>20 records, I guess.</p> <p>21 Q. Okay. And so -- and then when you left the</p> <p>22 rehab, you had your restrictive diet, correct?</p> <p>23 A. Uh-huh.</p> <p>24 Q. You have the medication that you had to</p> <p>25 make sure that the -- I'll call it stool was a certain</p>
<p style="text-align: right;">Page 145</p> <p>1 went there. So they, you know, were trying to get me</p> <p>2 up and get me moving and get my muscles firing again.</p> <p>3 And, you know, it was a very intense work -- workout</p> <p>4 multiple times a day.</p> <p>5 Q. I apologize. How long were you at the</p> <p>6 rehab?</p> <p>7 A. Three weeks.</p> <p>8 Q. Three weeks. Okay. So when you were</p> <p>9 discharged from the rehab, we know you still have the</p> <p>10 colostomy, right?</p> <p>11 A. Yes.</p> <p>12 Q. Were you discharged on any kind of pain</p> <p>13 medication?</p> <p>14 A. Yes.</p> <p>15 Q. What was it, do you know?</p> <p>16 A. No.</p> <p>17 Q. Do you know how often you had to take it?</p> <p>18 A. No.</p> <p>19 Q. Do you think after the -- you know, in the</p> <p>20 weeks after your discharge from the rehab, are you</p> <p>21 still taking the pain medication every day?</p> <p>22 A. I don't remember. I was discharged with a</p> <p>23 long list of medications. You know, I'm sure it's in</p> <p>24 the discharge instructions. And they had me on so</p> <p>25 many medications, and, you know, we followed their</p>	<p style="text-align: right;">Page 147</p> <p>1 consistency. You had some pain medication. You had</p> <p>2 the colostomy. Did you have to do -- did you have to</p> <p>3 go as an outpatient rehab, too, after that to get</p> <p>4 yourself moving again, or were you able to</p> <p>5 independently move when you were discharged?</p> <p>6 A. I had in-home physical therapy. They had</p> <p>7 ordered in-home physical therapy and occupational</p> <p>8 therapy.</p> <p>9 Q. So were you able -- when you were</p> <p>10 discharged, were you able to walk on your own or did</p> <p>11 you need some assistance?</p> <p>12 A. I could walk with a walker.</p> <p>13 Q. Like, a wheel walker in front of you?</p> <p>14 A. I'm sorry?</p> <p>15 Q. Like, a walker that you kind of use in</p> <p>16 front of you, one of those wheel walkers --</p> <p>17 A. Yes.</p> <p>18 Q. -- is that what you mean?</p> <p>19 How -- do you know how long you had</p> <p>20 to use that?</p> <p>21 A. Months. I don't remember how long.</p> <p>22 Q. Okay. So if you have the surgery in</p> <p>23 October of 2022, were you still using the walker by</p> <p>24 Christmas of 2022?</p> <p>25 A. Yes.</p>

<p>Page 148</p> <p>1 Q. How about after the new year in 2023, were</p> <p>2 you still using it in January and February, the</p> <p>3 walker?</p> <p>4 A. Yes.</p> <p>5 Q. How about the spring of '23, April?</p> <p>6 A. I -- yeah, it gets vague after that. And</p> <p>7 the only reason I remember January is because I had</p> <p>8 another DVT surgery in January and I remember being on</p> <p>9 a walker in the hospital, so that's the only reason I</p> <p>10 know that. But after that, I just don't know when it</p> <p>11 -- when I stopped using the walker.</p> <p>12 Q. Did any of the treating physicians that you</p> <p>13 spoke to either at Loudoun or the rehab, or even some</p> <p>14 of the outpatient doctors you saw, like the surgeon</p> <p>15 when you did see her at outpatient, did they ever</p> <p>16 attribute your DVTs to anything that Dr. Lindner's</p> <p>17 treatment was?</p> <p>18 A. My -- the DVT doctor, Dr. -- what's his</p> <p>19 name?</p> <p>20 Q. Oh, I don't know, you're asking --</p> <p>21 A. Ducoffe. Ducoffe (phonetic).</p> <p>22 Q. Okay.</p> <p>23 A. He told me in an appointment that he</p> <p>24 believed that the DVTs was caused by the steroids.</p> <p>25 Q. When you came home from the rehab, were you</p>	<p>Page 150</p> <p>1 in network, some are out of network, but, yes, they --</p> <p>2 insurance does do something with them.</p> <p>3 Q. Okay. And then am I correct that in March</p> <p>4 of 20 -- it looks like March 21st, if my notes are</p> <p>5 correct, of 2023, were you -- did you go to Fairfax</p> <p>6 Hospital to have the colostomy reversed?</p> <p>7 A. If that's what the record says. I really</p> <p>8 don't remember which hospital.</p> <p>9 Q. Okay.</p> <p>10 A. I know we saw a bunch of different</p> <p>11 hospitals, so. Yes, I did have it reversed in March.</p> <p>12 Q. Is Fairfax Hospital and Loudoun Hospital,</p> <p>13 do you know, are they affiliated or are they -- they</p> <p>14 separate hospitals?</p> <p>15 A. I believe they're both Inova, but I would</p> <p>16 think --</p> <p>17 Q. Okay.</p> <p>18 A. -- it would be in the name if it is.</p> <p>19 Q. So would -- and once your colostomy was</p> <p>20 reversed, you haven't had to have a colostomy after</p> <p>21 that; is that right?</p> <p>22 A. That is correct.</p> <p>23 Q. Okay. So you would have had your colostomy</p> <p>24 from October 7th, the day of your surgery, until March</p> <p>25 -- at least this says March 21st, sometime in March of</p>
<p>Page 149</p> <p>1 taking steroids?</p> <p>2 A. Yes.</p> <p>3 Q. Do you remember what they were, which one</p> <p>4 or what dose or anything like that?</p> <p>5 A. No. That would all be in the records, I</p> <p>6 guess.</p> <p>7 Q. And who was prescribing the steroids for</p> <p>8 you after the rehab?</p> <p>9 A. Well, I started seeing my general</p> <p>10 practitioner at that point, Dr. Hart. And so he would</p> <p>11 have -- he followed up on all the -- the meds that</p> <p>12 were prescribed by the doctor -- or I'm sorry, by the</p> <p>13 hospital.</p> <p>14 Q. Did you see an endocrinologist outpatient?</p> <p>15 A. Yes. Yeah, it took a long time to get an</p> <p>16 appointment with an endo. It -- I had to jump through</p> <p>17 hoops to -- to get one. But when I finally started</p> <p>18 seeing her, Dr. -- oh, gosh, what's her name? Sorry,</p> <p>19 I'm blank. But, yes, I've been under her care now.</p> <p>20 Q. So -- and are the doctors that you're</p> <p>21 seeing since you were discharged from the rehab</p> <p>22 covered under your insurance? The reason I ask is if</p> <p>23 I get the bills, I'll be able to find out who these</p> <p>24 people are if --</p> <p>25 A. Yeah. Yeah. I mean, of course, some are</p>	<p>Page 151</p> <p>1 2023 when it was reversed; is that correct?</p> <p>2 A. That is correct.</p> <p>3 Q. Okay. And then at some point did you</p> <p>4 suffer any complications from the reversal of the</p> <p>5 surgery of the colostomy, if you know? Infections,</p> <p>6 or, you know, things that can happen after surgery? I</p> <p>7 didn't see it in the hospital record, but it doesn't</p> <p>8 necessarily mean you didn't.</p> <p>9 A. Right. No, nothing specific. I mean, I</p> <p>10 still have pain at that site and other --</p> <p>11 Q. Do you --</p> <p>12 A. -- and other bowel issues, but no -- no</p> <p>13 complications.</p> <p>14 Q. I know -- I think in April of 2023 were you</p> <p>15 diagnosed with a hernia?</p> <p>16 A. Yes.</p> <p>17 Q. What -- do you have any understanding as to</p> <p>18 what caused you to develop the hernia?</p> <p>19 A. They said it was caused by the surgery, the</p> <p>20 open abdominal surgery and the colostomy.</p> <p>21 Q. Okay. And what, if anything, was done for</p> <p>22 the hernia to treat it?</p> <p>23 A. I had surgery in August to place a mesh</p> <p>24 over my entire abdomen. Because I had multiple</p> <p>25 hernias, and they knew -- he said it was very likely I</p>

<p>Page 152</p> <p>1 would get more hernias because of, you know, the 2 incision and the colostomy, so they were just going to 3 put mesh on my whole abdomen. 4 Q. You said to me that you still have pain at 5 your surgical site today; is that correct? 6 A. My entire abdomen, I have pain periodic and 7 on the specific incision sites, the colostomy site as 8 well the major incision. 9 Q. Okay. And did you ever talk to the doctor 10 about why that is, why you're continuing to experience 11 pain at the places you've just described to me? 12 A. Yes. 13 Q. Okay. Who did you talk to? 14 A. Well, the surgeon that did the -- who did 15 the reversal was Dr. Plerhoples. And, you know, he 16 just said that, you know, you're going to have pain, 17 you have -- you know, there's scar tissue and, you 18 know, it's reasonable to continue to have pain. 19 And then the surgeon that did the 20 hernia was Dr. Svestka. And he, you know, said the 21 same thing, it's normal to have ongoing pain from the 22 scar tissue and from the -- oh -- where the mesh 23 connects on the sides is where I have a lot of pain, 24 and then the incision sites. And he's still got me on 25 pain medication, gabapentin. I take that three times</p>	<p>Page 154</p> <p>1 deposition. 2 A. Yeah. That's like I should know that. So 3 it's either hydrocortisone oxalate or prednisone. 4 Q. What was it, hydrocortisone -- 5 A. I'm just blanking on whether it's 6 hydrocortisone or prednisone. 7 Q. Okay. 8 A. I should know that. 9 Q. That's okay. Maybe your husband will know 10 tomorrow. 11 How often do you take whatever it is? 12 A. Generally three times a day. 13 Q. Okay. You don't know the dose, do you? 14 A. Yeah. Morning is -- first thing in the 15 morning when I wake up is 20 milligrams, and at 2 16 o'clock, which is in one minute, that's 15 17 milligrams -- 18 Q. Okay. 19 A. -- and at 9 o'clock it's 10 milligrams. 20 Q. Do you have an understanding as to why you 21 have to continue to take the steroids today? 22 A. Because I feel terrible if I don't. 23 Q. Okay. 24 A. Because I was told my adrenals are shot 25 after such high steroids -- the endocrinologist told</p>
<p>Page 153</p> <p>1 a day. And he's hoping that will calm things down. 2 Q. And, I'm sorry, you said you had that 3 surgery in August -- 4 A. Yeah. 5 Q. -- of last year? 6 Okay. Are you taking any other pain 7 medication other than the gabapentin today? 8 A. No. 9 Q. We talked about the steroids, and we talked 10 in the hospitalization about the tapering and that you 11 were continuing to take the -- a steroid at the rehab 12 hospital as well; is that right? 13 A. I have not stopped taking steroids at all. 14 Q. Okay. That's what I was going to ask you. 15 So you have been on the steroids from the time that 16 Dr. Lindner prescribed it to you until today? 17 A. Yes. 18 Q. And what are the -- and you take them 19 daily -- 20 A. Yes. 21 Q. -- the steroids? 22 And what are -- do you know the 23 steroid that you take today? 24 A. That's a good question. 25 Q. I try to ask at least one good question a</p>	<p>Page 155</p> <p>1 me that -- there's my medicine alarm. 2 Q. Yeah, go ahead. 3 A. Sorry about that. 4 Q. No, no reason to apologize. 5 A. So my endocrinologist said that, you know, 6 it's just after such high steroids, my adrenals just 7 aren't really making my own cortisol anymore, and so 8 -- so I need to take this. 9 Q. Do you know, is there any hope that you 10 will at some point ever be able to come off the 11 steroids, or is it your understanding that it will -- 12 you will have to remain on them? 13 A. It's kind of the question of the century. 14 You know, I've told her how much I would like to try 15 to get off, and she just said, you know, we'll just 16 have to wait and see if your adrenals recover and 17 activate. 18 And also I've had the same discussion 19 with Dr. Hart, and he pretty much says the same thing. 20 But he also says that he believes it's unlikely that 21 I'll be able to get off them. 22 Q. Okay. 23 A. And so that's my dose today, but it does 24 vary somewhat. And if -- I've been instructed by the 25 doctor if I get sick, you know, got a -- I got a cold</p>

<p style="text-align: right;">Page 156</p> <p>1 or, you know, respiratory virus or something, you 2 know, I need to increase the dose, like, double the 3 dose, which I really have a hard time doing because 4 I'm terrified of taking a higher dose. But, you know, 5 I have to kind of mess with the dosing, and then I 6 have to try to figure out how to taper it down again. 7 And so I'm -- this is actually a little bit more -- 8 what I'm taking right now is -- I'm just coming off a 9 cold and I still have a bad cough, and so I'm -- I 10 think this is a little more than my normal right now. 11 Q. Okay. And do you know, why is it that they 12 want you to increase the dose if you get a respiratory 13 infection or something like that? 14 A. I'm sorry, what was the question? 15 Q. Do you know why they want you to increase 16 the dose if you end up with a -- you know, a cough or 17 an infection as you described? 18 A. I mean, because the doctor said so. 19 Q. Okay. No problem. 20 A. I don't know. 21 Q. Okay. So then the other symptoms that we 22 talked about early on in your deposition were some of 23 the other symptoms that you came for treatment for, 24 like the nausea, we've talked about the tingling and 25 those symptoms. So has there been any change in the</p>	<p style="text-align: right;">Page 158</p> <p>1 Q. Okay. How about fatigue, do you still 2 suffer from fatigue today? 3 A. Yes. 4 Q. Okay. Is it more -- 5 A. But it -- but it's better. 6 Q. Okay. Body stiffness or aches that you 7 were describing, do you still have any of that today? 8 A. Yes. 9 Q. Is it any better from when you were on the 10 higher steroids versus the steroids that you're on 11 today? 12 A. I mean, just overall I'm not lying in bed 13 deathly ill, so everything is going to be better today 14 than it was then. 15 Q. The body stiffness or achiness that we've 16 been talking about, does it prevent you from doing any 17 kind of activities of daily living today? 18 A. Yeah, I mean, I use a cane and I'm -- I'm 19 -- struggle to get out of a lot of chairs because 20 they're not high enough. You know, getting in and out 21 of a car is a little bit challenging. So definitely 22 it slows me down. I don't -- I don't go out much or 23 go to stores and things because it's -- it's hard. It 24 hurts. I have pain when I'm walking a lot. 25 Q. So what's causing the pain when you walk?</p>
<p style="text-align: right;">Page 157</p> <p>1 conditions that we talked about earlier, the nausea, 2 the fatigue, the brain fog, since the steroid dose has 3 been tapered down? 4 MR. LAMB: Objection to form. 5 Q. Do you still get them? Are they gone -- 6 you know ... 7 A. Has there been a change since -- I'm sorry, 8 I'm not understanding you. Has there been a change 9 from when to when? 10 Q. So when you first started treating with 11 Dr. Lindner and he just -- he said to you that he 12 thinks he knows what's causing your symptoms, it's 13 this babesiosis, and that he was going to put you on a 14 regimen we already talked about, those symptoms -- and 15 I think some of the ones, and I just wrote them down, 16 nausea, fatigue, body stiffness and aches, brain fog, 17 insomnia, you said you couldn't sleep. 18 Let me go individually now. So do 19 you still suffer from nausea today? 20 A. No. 21 Q. Okay. Do you know when it was that the 22 nausea went away? 23 A. Sometime last spring, I guess. 24 Q. Of 2023? 25 A. Yes.</p>	<p style="text-align: right;">Page 159</p> <p>1 In other words, is it a joint pain? Is it a muscle 2 pain? Is it an all-body pain? Like, what is it 3 that's limiting you to do that you described? 4 A. I guess all the above. I don't -- I don't 5 really know. I mean, doctors don't really talk about 6 what's causing it, I guess. 7 Q. Is it a general overall body aching that 8 you feel every day? 9 A. No, it's more joint -- joint pain or muscle 10 pain or -- well, nerve pain. And, you know, being 11 active definitely gets it aggravated, I guess. 12 Q. The more active you are, the worse the 13 pain; is that right? 14 A. Yes, generally. 15 Q. Do you still have the brain fog? 16 A. Some, but it's better. 17 Q. How about insomnia or hard time sleeping? 18 A. Insomnia is better. Not being able to go 19 to sleep, I can -- I do that better, but I do wake up 20 usually every couple hours all night long, so I still 21 struggle to sleep. 22 Q. Do you know why that is, why you're still 23 suffer from the insomnia as you described today? And 24 no doctor -- do you know if any doctors told you why 25 they thought you were still suffering from sleep</p>

<p>1 issues?</p> <p>2 A. No.</p> <p>3 Q. Do you treat with somebody for insomnia,</p> <p>4 sleeping issues?</p> <p>5 A. I mean, I've talked to my general</p> <p>6 practitioner, Dr. Hart.</p> <p>7 Q. And he -- has he done any testing or</p> <p>8 prescription medication, anything like that for the</p> <p>9 sleep issues?</p> <p>10 A. No. You know, I mean, I think we've had</p> <p>11 the discussion about, you know, the steroids can</p> <p>12 interfere with sleep and trying to -- he's encouraged</p> <p>13 me to make sure I've talked to the endocrinologist</p> <p>14 about, you know, the steroid -- how much I'm taking</p> <p>15 and the fact that it's -- could that be impacting</p> <p>16 sleep.</p> <p>17 Q. And have you talked to the endocrinologist</p> <p>18 about that?</p> <p>19 A. I don't think I've seen her since he told</p> <p>20 me that. So, no, I don't think I have talked to her</p> <p>21 specifically about sleep.</p> <p>22 Q. Okay. The brain fog, are you treating with</p> <p>23 anyone for that?</p> <p>24 A. I mean, it's in my general list of things</p> <p>25 we discuss when I talk to my general practitioner.</p>	<p>Page 160</p> <p>1 Q. Are you treating with anyone for that</p> <p>2 symptom, the excess sweating?</p> <p>3 A. I mean, when you say treating for, I don't</p> <p>4 -- I mean, Dr. Lindner was treating me for those</p> <p>5 things. And then -- and then when I was --</p> <p>6 Q. I'm sorry, I meant --</p> <p>7 A. -- after the hospital, then I've been</p> <p>8 seeing Dr. Hart, so ...</p> <p>9 Q. Yeah, I meant today. Are you seeing anyone</p> <p>10 to address the issue of the excess sweating during the</p> <p>11 day?</p> <p>12 A. I mean, that would be something I would</p> <p>13 have talked to Dr. Hart about.</p> <p>14 Q. Okay. And has he prescribed any kind of</p> <p>15 medication or herb --</p> <p>16 A. No.</p> <p>17 Q. -- or, you know, anything like that? No?</p> <p>18 A. No, he -- I think when we last talked about</p> <p>19 it, he probably -- I think he said that, you know, he</p> <p>20 thought it was a lot of -- the different drug</p> <p>21 interactions and things. And, you know, it has been</p> <p>22 true that as I've gotten off a lot of the drugs they</p> <p>23 had me on and tapered -- you know, got the steroid</p> <p>24 down to a lower dose, that they've gone away for the</p> <p>25 most part.</p>
<p>Page 161</p> <p>1 Q. Okay. Is there any kind of testing or, I</p> <p>2 don't know, therapy prescribed for the brain fog?</p> <p>3 A. No.</p> <p>4 Q. You said that you had constant headaches,</p> <p>5 or I think you described vise, your head felt like it</p> <p>6 was in a vise. Do you still have -- suffer from any</p> <p>7 of that today?</p> <p>8 A. I do if I miss my 2 o'clock dose.</p> <p>9 Q. Oh, the steroid. Okay.</p> <p>10 A. Yeah.</p> <p>11 Q. And if you stay on the steroids, do you</p> <p>12 still have the headaches or do they go -- have they</p> <p>13 gone away?</p> <p>14 A. Sometimes I do, but that -- you know, I</p> <p>15 have to really stay on top of the -- the dosing of</p> <p>16 that. And if I -- like I said, if I'm -- forget a</p> <p>17 dose or miss a dose, usually I'll know I missed it</p> <p>18 because of that -- that particular symptom is the --</p> <p>19 is kind of the main one that will hit me first.</p> <p>20 Q. Okay. Night sweats, do you have night</p> <p>21 sweats?</p> <p>22 A. Not anymore.</p> <p>23 Q. Excess sweating during the day?</p> <p>24 A. It's gotten a lot better. It's been a</p> <p>25 while, so I guess I would say that's a lot better.</p>	<p>Page 163</p> <p>1 Q. Okay. We talked about your sensations in</p> <p>2 your legs, tingling or vibrations in your legs. Do</p> <p>3 you still have those today?</p> <p>4 A. Yes.</p> <p>5 Q. Okay. And is there any -- anybody -- who</p> <p>6 do you see for that, if anybody at all?</p> <p>7 A. Dr. Hart is -- would be the one that I</p> <p>8 would talk about all these symptoms with.</p> <p>9 Q. Okay. And has he addressed those in any</p> <p>10 way, whether it's suggestion for specialists or tests</p> <p>11 or medication?</p> <p>12 A. No. I mean, he knows I was evaluated by a</p> <p>13 rheumatologist and kind of doesn't have any other</p> <p>14 suggestions as to how to address that.</p> <p>15 Q. And did the rheumatologist have any kind of</p> <p>16 suggestions as to how to address that?</p> <p>17 A. No, as I said, she diagnosed with me</p> <p>18 something and then said that her solution wasn't going</p> <p>19 to address that symptom, so I didn't think that was a</p> <p>20 good answer.</p> <p>21 Q. When is the last time you saw the</p> <p>22 rheumatologist?</p> <p>23 A. Let me get my years straight. That would</p> <p>24 have been fall of '21.</p> <p>25 Q. Okay. So while you were treating with</p>

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1 Dr. Lindner?
2 A. Right.
3 Q. How about the shortness of breath, you
4 talked about shortness of breath as a symptom that you
5 had during the care of Dr. Lindner?
6 A. It's definitely better. I still have it,
7 but it's much better.
8 Q. And did anyone tell you what they're
9 attributing the shortness of -- and when I mean
10 anyone, I mean a doctor. Has a doctor attributed your
11 shortness of breath to anything?
12 A. Babesia.
13 Q. Okay. And then how about today, do they
14 still say Babesia or is it something else?
15 A. Dr. Hart would say Babesia.
16 Q. Okay. Have you ever -- since your
17 hospitalization at Loudoun, were you ever seen by a
18 cardiologist?
19 A. Yes, I saw a cardiologist in I think
20 February of '23.
21 Q. Okay. Do you remember the name of the
22 cardiologist, or the group name?
23 A. No. I'm sure it's in the record there. I
24 was required to see a cardiologist before my reversal
25 surgery.

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1 Q. Is -- was it like a surgical clearance kind
2 of thing?
3 A. Yeah.
4 Q. Have you seen one since then, though?
5 A. No.
6 Q. More specifically for like an outpatient
7 cardiology follow-up?
8 A. No, because everything was fine when she
9 did the clearance.
10 Q. Have you ever treated with a pulmonologist?
11 A. No.
12 Q. So you said to me that even today after the
13 bowel surgery you still have bowel issues. Will you
14 explain to me what those are, please?
15 A. Urgency. So like I have to go, and I have
16 to go right this second. And so trying to get there
17 on time -- on time and bowel leakage. And sometimes
18 just discomfort, but I guess that's more like what we
19 had already talked about, this pain from around the
20 colostomy site and scar tissue in there, so, you know,
21 sur -- surface pain, I guess. And sometimes just
22 random shooting pains in my abdomen, like right on
23 that site.
24 Q. So when you say on this site, you mean
25 where the colostomy was?

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1 A. I'm sorry?
2 Q. When you say on this site, do you mean on
3 the site where the colostomy bag was?
4 A. Yes.
5 Q. Okay. And do you take any medication to
6 help with your urgency of the bowel leakage?
7 A. No.
8 Q. Is there any kind of special diet that
9 you're on to help with the urgency of the bowel
10 leakage?
11 A. No.
12 Q. Who do you --
13 A. They -- they said that -- the surgeon said
14 that there's nothing they can do about that.
15 Q. Do you follow up with any kind of
16 gastroenterologist outpatient for your -- any bowel
17 issues?
18 A. No.
19 Q. We're getting close to the end, I promise.
20 Tell me in your own words, and literally take as much
21 time as you need, how do you think Dr. Lindner's
22 treatment has affected your day-to-day life?
23 A. Gosh. I can't. I just felt like he ruined
24 my life. I -- I really -- life's just hard. And I
25 have all these pains, and it's changed my -- I lost

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1 all my hair, and what grew back I don't like. I don't
2 -- I used to have long straight hair, and so I don't
3 know where this short curly hair came from, but at
4 least it grew back, so I'm glad for that. But just
5 the disfigurement of my -- my whole abdomen, and I
6 definitely have gained weight from -- presumably from
7 the steroids, according to the endocrinologist.
8 And I hate being dependent on the
9 steroids. And I just have so many symptoms that are
10 because of this nightmare I went through. And, I
11 mean, it definitely has messed with my mind. And I
12 have a lot of really horrific bad memories and dreams
13 and PTSD and anxiety. And I just -- I don't even feel
14 like -- I feel like a different person than I used to
15 be. Definitely lost a lot of my confidence. And I
16 used to be very social, and I just really struggle to
17 -- to get back to that.
18 Q. I'm going to ask you some follow-up
19 questions on what you told me if you don't mind.
20 A. Okay.
21 Q. You said that you had lost all your hair.
22 When was that?
23 A. I started losing it in rehab, I guess.
24 Q. Rehab after the bowel surgery?
25 A. No, rehab hospital after the surgery in

<p style="text-align: right;">Page 168</p> <p>1 October. So rehab in October, November, and it just 2 kept -- kept falling out. And by Thanksgiving or 3 Christmas I had, like, a few strands of hair left. 4 Q. Do you know why that -- what caused it? 5 Did anybody ever explain to you what caused the hair 6 loss? 7 A. I mean, I had doctors tell me -- I'm trying 8 to think what doctor would have told me. I guess Dr. 9 Hart, you know, he said I -- I guess from the steroids 10 or the sepsis. Any trauma -- he said any traumatic 11 thing like that to your body, traumatic like sepsis, 12 you know, could cause that. 13 Q. So you said to me that you suffer from 14 PTSD. Were you diagnosed with PTSD? 15 A. Yes. 16 Q. Who did that? 17 A. What's her name? It's in the medical 18 record. 19 Q. The only reason I ask is -- I'm not saying 20 it's not. I just don't -- 21 A. Yeah. 22 Q. -- remember seeing it. 23 A. Stacey Thompson -- 24 Q. Okay. 25 A. -- I think is her name.</p>	<p style="text-align: right;">Page 170</p> <p>1 the Loudoun hospitalization? 2 A. Not that I remember. 3 Q. I know Dr. Lindner's chart has a lot of the 4 e-mail exchanges between him and you or him and your 5 husband. Do you know, do you have any e-mails that 6 weren't contained in the chart? Do you retain any of 7 the e-mails from Dr. Lindner that you haven't turned 8 over to counsel? 9 A. Well, I turned over every e-mail I've 10 had -- 11 Q. Okay. 12 A. -- to counsel. But I've never compared 13 those to what Dr. Lindner did, so I don't know. 14 Q. Okay. As long as I know that everything 15 that you had you turned over to counsel, that means I 16 have it, too. 17 A. Yeah. 18 Q. I got recent -- I think this -- was it last 19 week, I think, I received little blurbs from voice 20 messages that were left on your phone from 21 Dr. Lindner. There might have been three of them. 22 Have all the voice messages that you retained from 23 Dr. Lindner been turned over to counsel, too? 24 A. As far as I know, yeah. 25 Q. Do you have any text exchange that you</p>
<p style="text-align: right;">Page 169</p> <p>1 Q. And when was that? Was it just last year 2 after the surgery or before the surgery? 3 A. I think I started seeing her in January of 4 '23. 5 Q. Okay. Is she a counselor, a psychiatrist, 6 psychologist, do you know? 7 A. I don't know. Counselor of some kind. 8 Q. Okay. And do you still continue to treat 9 with her today? 10 A. No. I took a break in the fall this past 11 year. I just couldn't deal with thinking about it and 12 processing all the trauma anymore. I just needed a 13 break from thinking about the trauma, and so I took a 14 break. And with the intent to go back to it to -- so 15 that I wouldn't fall apart whenever I try to talk 16 about it. And so I haven't done that yet. 17 Q. Okay. When was the last time that you 18 spoke to Dr. Lindner -- or I shouldn't say spoke, had 19 communication with Dr. Lindner? 20 A. With who? 21 Q. My client, Dr. Lindner. 22 A. Last time I had any communication would be 23 whatever e-mails before I went in the hospital in 24 October, but I -- I don't know the date. 25 Q. Okay. So you haven't spoken to him since</p>	<p style="text-align: right;">Page 171</p> <p>1 maintain with Dr. Lindner? 2 A. I don't believe so. I don't think so. 3 Q. Do you retain any voice messages from 4 Carol, I think her name is Young, the office person 5 from Dr. Lindner? 6 A. I don't think it's Young. 7 Q. Maybe it's not Young. Carol is her first 8 name. 9 A. Might be Carol Kelly. Do I have any texts? 10 No, I -- I don't recall ever texting with them. 11 Q. Well, how about a voice message from Carol 12 that you have now; not so much if you had one, but did 13 you retain any that you haven't turned over? 14 A. Oh, no. 15 Q. Okay. Have you -- did you talk to any of 16 the pharmacists in Virginia about any of the 17 prescriptions that Dr. Lindner was providing to you? 18 A. No. 19 MS. SHWED: I think those are all the 20 questions I have. Other counsel may have questions, 21 Mrs. Wolking, but thank you for your time. I 22 appreciate it. 23 MR. LAMB: Do you want to take a 24 quick break before the pharmacy -- 25 THE WITNESS: No, I'm fine.</p>

<p>Page 172</p> <p>1 MR. LAMB: Okay.</p> <p>2 MS. SHWED: You do or you don't? I</p> <p>3 didn't hear it.</p> <p>4 THE WITNESS: I'm fine.</p> <p>5 MR. LAMB: She doesn't need a break.</p> <p>6 MS. SHWED: Okay.</p> <p>7 MR. BENEDETTO: She does -- okay.</p> <p>8 * * *</p> <p>9 EXAMINATION</p> <p>10 BY MR. BENEDETTO:</p> <p>11 Q. Ms. Wolking, I've been off camera, and I</p> <p>12 apologize for that. I have to cover for Sue, who has</p> <p>13 been on camera, she's my colleague. My name is</p> <p>14 Conrad. I represent Tunkhannock Pharmacy, and I have</p> <p>15 a few follow-up questions to ask you. Okay?</p> <p>16 A. Okay.</p> <p>17 Q. And the same general guidelines that</p> <p>18 counsel provided you earlier still apply. And you</p> <p>19 understand that, correct?</p> <p>20 A. Yes.</p> <p>21 Q. Okay. And Ms. Shwed did a great job in</p> <p>22 terms of covering most of the ground. I do have these</p> <p>23 questions on behalf of my client, so it might be that</p> <p>24 I'm skipping around a lot. And I don't mean to try to</p> <p>25 confuse or anything, but so much ground has been</p>	<p>Page 174</p> <p>1 A. And before they moved to Pennsylvania,</p> <p>2 yeah.</p> <p>3 Q. Okay. And how do you know them? Were they</p> <p>4 neighbors, just --</p> <p>5 A. Oh.</p> <p>6 Q. -- colleagues? That's kind of my question.</p> <p>7 A. She was home schooling her daughter, and we</p> <p>8 were home schooling, so probably through the home</p> <p>9 schooling network. Maybe at church. I'm not real</p> <p>10 sure.</p> <p>11 Q. Okay. And where did you live in northern</p> <p>12 Kentucky?</p> <p>13 A. We lived in a couple places, but I think</p> <p>14 when I knew her it was -- we were in Crittenden,</p> <p>15 Kentucky.</p> <p>16 Q. Okay. And when you met Dr. Lindner through</p> <p>17 the Reidsmas, were you aware of why they were treating</p> <p>18 with Dr. Lindner? I understand it was for hormone and</p> <p>19 hormone replacement therapy, but do you understand why</p> <p>20 they were treating with Dr. Lindner with that</p> <p>21 treatment plan?</p> <p>22 A. Yes.</p> <p>23 Q. And what was your understanding of that?</p> <p>24 A. That Bill had a hormone problem where he --</p> <p>25 my friend Lisa had had a kidney transplant, her</p>
<p>Page 173</p> <p>1 covered, I'm just going to try to patch some holes in</p> <p>2 terms of the testimony. Okay. Do you understand</p> <p>3 that?</p> <p>4 A. Yes.</p> <p>5 Q. Okay. All right. Thanks. Now, bear with</p> <p>6 me, because, again, she was doing a great job. I've</p> <p>7 been taking notes, and I will make sure I try not to</p> <p>8 ask you questions that have already been covered.</p> <p>9 MR. BENEDETTO: Can we go off the</p> <p>10 video record, please?</p> <p>11 THE VIDEOGRAPHER: Off the video</p> <p>12 record, 2:24 p.m.</p> <p>13 MR. BENEDETTO: And then can we go</p> <p>14 off of the written record, please?</p> <p>15 (Discussion held off the video and</p> <p>16 steno record.)</p> <p>17 THE VIDEOGRAPHER: On the video</p> <p>18 record, 2:24 p.m.</p> <p>19 BY MR. BENEDETTO:</p> <p>20 Q. Thank you. How did you meet the Reidsmas?</p> <p>21 A. Oh, wow. They used to live where we lived,</p> <p>22 but that was back in northern Kentucky where we used</p> <p>23 to live, so we were friends back then.</p> <p>24 Q. Okay. So from before you moved to Virginia</p> <p>25 18, 19 years ago?</p>	<p>Page 175</p> <p>1 husband gave her a kidney. And he had -- after he</p> <p>2 gave her a kidney, he had some major hormone imbalance</p> <p>3 problems.</p> <p>4 Q. Okay.</p> <p>5 A. So he had severe behavioral issues, and</p> <p>6 Dr. Lindner really helped him with that.</p> <p>7 Q. Okay. I'm going to bring you to 2008. My</p> <p>8 understanding is that you started experiencing or</p> <p>9 being diagnosed with Lyme disease; is that correct?</p> <p>10 A. I don't remember when it was, but it sounds</p> <p>11 about right.</p> <p>12 Q. How did you come about being diagnosed with</p> <p>13 Lyme disease?</p> <p>14 A. I'm pretty sure that I just had a bunch of</p> <p>15 symptoms and went to the doctor, and he thought that's</p> <p>16 what it was.</p> <p>17 Q. Was there -- well, I mean, basically did</p> <p>18 you ever see -- back then do you recall seeing a tick</p> <p>19 on your body or a tick bite location on your body?</p> <p>20 A. Oh, yeah. I --</p> <p>21 Q. Okay.</p> <p>22 A. At a specific time where I took a tick off</p> <p>23 me and --</p> <p>24 Q. Okay.</p> <p>25 A. Yeah.</p>

<p style="text-align: right;">Page 176</p> <p>1 Q. All right. And you -- and you recall that</p> <p>2 was at the same time that you went for treatment for</p> <p>3 symptoms that led a treatment provider to diagnose you</p> <p>4 with Lyme disease?</p> <p>5 A. My vague memory is that it was a long time</p> <p>6 afterwards. At the time I didn't think anything about</p> <p>7 the tick, taking it off me, but maybe a year and a</p> <p>8 half, something later, I'm guessing.</p> <p>9 Q. Okay.</p> <p>10 A. Then when I had all these symptoms, you</p> <p>11 know, that was one of his line of questionings was,</p> <p>12 have you had any tick bites.</p> <p>13 Q. Did you have any of those symptoms after --</p> <p>14 immediately after, meaning the day, that week of the</p> <p>15 tick bite, but that did not alarm you to the point of</p> <p>16 seeking treatment?</p> <p>17 A. I don't remember.</p> <p>18 Q. And you said that it was about a year and a</p> <p>19 half after you -- you remember taking the tick off of</p> <p>20 you that you were diagnosed with the Lyme?</p> <p>21 A. Yes, I probably shouldn't guess. It would</p> <p>22 be when I started -- I think it would be when I</p> <p>23 started seeing Dr. Stewart.</p> <p>24 Q. Okay. Okay. And then I'm going to</p> <p>25 fast-forward past your hormone treatment therapy with</p>	<p style="text-align: right;">Page 178</p> <p>1 A. -- thought I had symptoms of the other</p> <p>2 ones, just didn't -- couldn't treat them all at the</p> <p>3 same time.</p> <p>4 Q. And what is your understanding of the</p> <p>5 reason Dr. Stewart would have treated Lyme disease</p> <p>6 either primarily or first before treating any other</p> <p>7 tickborne illnesses?</p> <p>8 MR. LAMB: Object to form. You can</p> <p>9 answer.</p> <p>10 A. Yeah, I mean, that's just what he told me.</p> <p>11 He -- that was his belief as to how to do it.</p> <p>12 Q. And back in 2008 when you were first</p> <p>13 diagnosed with Lyme, and potentially these other</p> <p>14 tickborne illnesses, did you do any independent</p> <p>15 reading, research, regarding tickborne illnesses?</p> <p>16 A. Yes.</p> <p>17 Q. Okay. And did you consult or treat with</p> <p>18 any other doctor other than Dr. Stewart for Lyme</p> <p>19 disease specifically back in 2008?</p> <p>20 A. In 2008?</p> <p>21 Q. Yes.</p> <p>22 A. I would have no memory of what I did in</p> <p>23 2008.</p> <p>24 Q. Okay. How about all the way through June</p> <p>25 2021, again, specifically for the Lyme disease?</p>
<p style="text-align: right;">Page 177</p> <p>1 Dr. Lindner to June 2021. What is your understanding</p> <p>2 of the reason why Dr. Lindner came to the conclusion</p> <p>3 and the diagnosis that you were suffering from</p> <p>4 babesiosis at that time?</p> <p>5 A. Based on the specific symptoms that I told</p> <p>6 him. And one symptom that I forgot about is I had</p> <p>7 severe shin pain, and that's supposed to be a classic</p> <p>8 babesiosis symptom. And I only mention that because I</p> <p>9 don't think I mentioned it at all in the other</p> <p>10 symptoms we've talked about today. But that -- that</p> <p>11 and the shortness of breath and stomach pain I think</p> <p>12 specifically were ones that he said were very much</p> <p>13 specific to Babesia.</p> <p>14 Q. Okay. And back in 2008, did Dr. Stewart at</p> <p>15 any point state to you that this could not -- that</p> <p>16 what he saw in your -- terms of your symptoms was</p> <p>17 maybe not Lyme disease but Babesia or babesiosis?</p> <p>18 A. Yeah. As I said before, I mean, he did</p> <p>19 mention that co-infections like Babesia and Bartonella</p> <p>20 go along -- often go along with Lyme disease, but that</p> <p>21 his treatment protocol was to go after the Lyme</p> <p>22 disease first. And at least at that time that was his</p> <p>23 belief, and so we really didn't deal with the other</p> <p>24 issues. Because he --</p> <p>25 Q. Did --</p>	<p style="text-align: right;">Page 179</p> <p>1 A. Right. I know I saw a Dr. Solomon, and he</p> <p>2 specifically said that I had Lyme disease. And he</p> <p>3 felt like he had cleared -- cleared it or gotten rid</p> <p>4 of it through his homeopathics treatment. I -- I</p> <p>5 don't recall if there was another doctor in there. I</p> <p>6 don't think so. I think Stewart was -- Dr. Stewart</p> <p>7 was the only one.</p> <p>8 Q. And do you recall approximately what year</p> <p>9 you saw Dr. Solomon?</p> <p>10 A. I don't. I'm sorry.</p> <p>11 Q. And the research and independent</p> <p>12 investigation you did regarding Lyme disease back in</p> <p>13 2008, what was your understanding of Lyme disease</p> <p>14 treatment, if you know?</p> <p>15 A. I mean, I was just trying to learn about</p> <p>16 it, what -- what it meant and all the different weird</p> <p>17 symptoms I had. I came to believe that I wished I had</p> <p>18 felt symptoms earlier, and that maybe we could have</p> <p>19 knocked it out. But that because it had gone so long</p> <p>20 before being treated, that -- that maybe, you know, it</p> <p>21 let it take root a little bit more. That was the only</p> <p>22 thing I really thought about it.</p> <p>23 Q. Okay. And -- and back then in 2008, did</p> <p>24 you do any independent research, reading or study</p> <p>25 regarding Babesia and babesiosis once you heard that</p>

<p style="text-align: right;">Page 188</p> <p>1 in the morning or less at this time, but more at this</p> <p>2 time. So, yeah, he was providing direction.</p> <p>3 Q. Okay. And other than filling your</p> <p>4 prescription, did Tunkhannock provide you with any</p> <p>5 guidance regarding the prescriptions?</p> <p>6 A. No.</p> <p>7 Q. Other than the speaking and -- strike that.</p> <p>8 You spoke with someone at Tunkhannock</p> <p>9 on the phone when the prescriptions were about to be</p> <p>10 filled?</p> <p>11 A. Before they would mail them to me, they</p> <p>12 would confirm that I wanted them mailed to me.</p> <p>13 Q. Okay. And did they offer you any other</p> <p>14 consultation?</p> <p>15 A. No.</p> <p>16 Q. Okay. And other than -- other than those</p> <p>17 times confirming that they wanted -- that you wanted</p> <p>18 them mailed to you, did you speak with anyone from</p> <p>19 Tunkhannock regarding your treatment?</p> <p>20 A. No.</p> <p>21 Q. Okay. And when you affirmatively stated</p> <p>22 that you wanted those prescriptions filled, was that</p> <p>23 because you were being guided or instructed by Dr.</p> <p>24 Lindner regarding getting those prescriptions filled?</p> <p>25 A. I mean, yeah, he was telling me to take</p>	<p style="text-align: right;">Page 190</p> <p>1 MR. LAMB: Objection to form. Is</p> <p>2 there a time period we're talking about here or ...</p> <p>3 Q. Yeah, let's say -- well, let's say August</p> <p>4 to October 2022.</p> <p>5 A. I have no idea.</p> <p>6 Q. Okay. And how about --</p> <p>7 A. I could look it up, I'm sure, but I -- I'm</p> <p>8 sure you could look it up, too. I mean, I'm sure it's</p> <p>9 in the record is what I mean, but I just don't</p> <p>10 remember.</p> <p>11 Q. Do you recall why Dr. Lindner had you fill</p> <p>12 prednisone prescription at Tunkhannock and then after</p> <p>13 that fill a dexamethazone prescription or several</p> <p>14 prescriptions?</p> <p>15 A. I was taking -- he told me I was going to</p> <p>16 be taking a higher dose, so he was going to switch it</p> <p>17 to dexamethazone I think. I'm not sure I'm</p> <p>18 remembering why he switched me. Part of it was</p> <p>19 because it was more potent, and so I could take less</p> <p>20 pills and get more.</p> <p>21 Q. Do you know where Tunkhannock ordered the</p> <p>22 corticosteroids from?</p> <p>23 A. No.</p> <p>24 Q. Did you ever have the prescriptions filled</p> <p>25 at Tunkhannock by way of e-mail and not phone?</p>
<p style="text-align: right;">Page 189</p> <p>1 them, so I needed to fill them.</p> <p>2 Q. I don't recall if -- I believe this was</p> <p>3 asked, but I don't recall the answer. Were you</p> <p>4 filling steroid prescriptions concurrently, at the</p> <p>5 same time, in August and September 2022, that you were</p> <p>6 -- locally that -- while you were receiving them from</p> <p>7 Youngs, from Tunkhannock?</p> <p>8 A. I know I did get some filled at the local</p> <p>9 pharmacy. I don't know if it was concurrent or what</p> <p>10 month it was.</p> <p>11 Q. Okay. And was that prescription written by</p> <p>12 Dr. Lindner?</p> <p>13 A. For my local pharmacy?</p> <p>14 Q. Yes.</p> <p>15 A. Yes.</p> <p>16 Q. And did your local pharmacy fill that</p> <p>17 prescription?</p> <p>18 A. Yes.</p> <p>19 Q. And do you recall how many prescriptions</p> <p>20 were filled by your local pharmacy for steroids --</p> <p>21 A. I don't.</p> <p>22 Q. -- that were written by Dr. Lindner?</p> <p>23 A. No.</p> <p>24 Q. Okay. Was it -- it was more than one or</p> <p>25 just one?</p>	<p style="text-align: right;">Page 191</p> <p>1 A. No.</p> <p>2 Q. Did you ever ask, when you spoke with</p> <p>3 someone from Tunkhannock and filling those</p> <p>4 prescriptions, about any side effects of the steroids?</p> <p>5 A. No.</p> <p>6 Q. And why not?</p> <p>7 A. I was too sick to think straight for one.</p> <p>8 I was trusting my doctor to -- I was just following my</p> <p>9 doctor's instructions.</p> <p>10 Q. I'm sorry. I'm just reviewing my notes</p> <p>11 again so I don't ask repetitive questions which I've</p> <p>12 already done once or twice.</p> <p>13 When did you stop treating with</p> <p>14 Dr. Lindner for babesiosis?</p> <p>15 A. When I went in the hospital for emergency</p> <p>16 surgery.</p> <p>17 Q. And when you left the hospital and started</p> <p>18 rehab, so time period basically December 2022 or all</p> <p>19 of 2023, are you still treating for babesiosis?</p> <p>20 A. Dr. Hart is -- yes, but he's using herbal</p> <p>21 treatments instead of pharmaceuticals.</p> <p>22 Q. Did Dr. Hart formally diagnose you with</p> <p>23 babesiosis?</p> <p>24 A. Yes.</p> <p>25 Q. Are you aware of whether babesiosis is a</p>